

Ninety-first Annual Report
of the
Massachusetts Charitable
Eye and Ear Infirmary

For the Year
1916

THE MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

233 CHARLES STREET, COR. FRUIT STREET, BOSTON

OUT-PATIENT DEPARTMENT

The Out-Patient Department is open daily, excepting Sundays and legal holidays, from 8.30 to 10.30 A. M., for examination and treatment of all poor persons afflicted with disease of the eye or ear. Persons needing treatment in the hospital wards will be advised accordingly. Medicines and glasses are furnished at the Infirmary, but neither prescription nor advice will be sent by mail, express, or messenger.

HOSPITAL

Persons recommended for admission to the hospital wards should apply at the Superintendent's office before 3.00 P. M. *on week days only, excepting legal holidays.*

Accident and emergency cases admitted at any time.

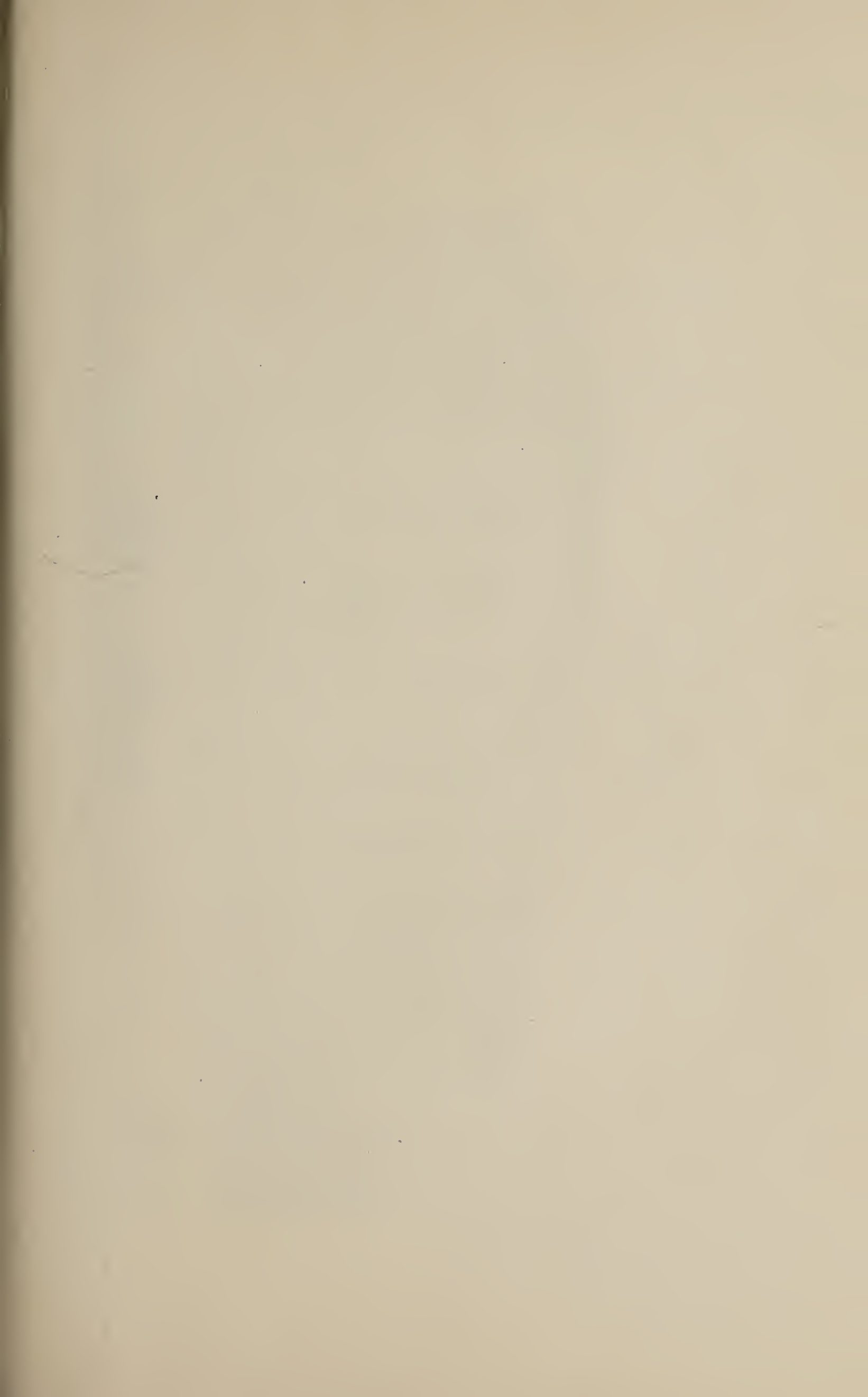
All communications about the Infirmary or any inmate must be addressed to the Superintendent, and should contain the full name of the patient as well as the name and address of the writer.

Persons admitted to the wards as in-patients will be charged for board at the rate of fifteen dollars per week payable in advance, unless some special arrangement is made by the Superintendent. No reduction in rate of board made to those residing outside the Commonwealth of Massachusetts.

Visitors will be admitted to see patients from 2 to 3 o'clock in the afternoon, and but one visitor a day is allowed to each patient over seven years of age. Children under seven years of age may be visited on Sundays and legal holidays from 2 to 3 P. M., when two visitors are permitted. Visitors may be excluded at any time.

On Sundays and holidays two visitors are allowed each patient.

The Infirmary reserves the right to investigate every case.





Ninety-first Annual Report
of the
Massachusetts Charitable
Eye and Ear Infirmary

For the Year
1916

Cambridge
The University Press
1917

Officers

Board of Managers, 1916-1917

GEORGE P. GARDNER
Feb. 1, 1887

HENRY PARKMAN
May 2, 1893

WILLIAM D. SOHIER¹
Jan. 7, 1896

ROBERT HOMANS
May 1, 1900

WILLIAM S. SPAULDING
Feb. 4, 1902

DR. GEORGE B. SHATTUCK
Oct. 30, 1902

WILLIAM C. ENDICOTT
Feb. 3, 1903

RUSSELL G. FESSENDEN
Feb. 3, 1903

HERBERT M. SEARS
Dec. 20, 1905

CHARLES P. CURTIS
Feb. 5, 1907

ROBERT H. STEVENSON, JR.
Feb. 5, 1907

JOHN LAWRENCE¹
Feb. 5, 1907

JAMES DEAN
June 12, 1914

JAMES C. HOWE
June 12, 1914

President

DR. GEORGE B. SHATTUCK

Secretary

ROBERT HOMANS, 1035 Exchange Building, 53 State Street, Boston

Treasurer

HENRY PARKMAN, 53 State Street, Boston

Executive Committee

GEORGE P. GARDNER

JOHN LAWRENCE

HERBERT M. SEARS

Finance Committee

RUSSELL G. FESSENDEN

JAMES DEAN

WILLIAM S. SPAULDING

¹ Appointed by the Commonwealth.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Visiting Committee

January	MR. HOWE	July	MR. PARKMAN
	MR. SEARS		MR. STEVENSON
February . . .	MR. SEARS	August	MR. STEVENSON
	DR. SHATTUCK		MR. HOMANS
March	DR. SHATTUCK	September . . .	MR. HOMANS
	MR. SPAULDING		MR. CURTIS
April	MR. SPAULDING	October	MR. CURTIS
	MR. FESSENDEN		MR. ENDICOTT
May	MR. FESSENDEN	November . . .	MR. ENDICOTT
	MR. DEAN		MR. GARDNER
June	MR. DEAN	December . . .	MR. GARDNER
	MR. PARKMAN		MR. HOWE

Ladies' Visiting Committee

MRS. ROBERT SHAW RUSSELL	MISS ELEANOR C. BANCROFT
MRS. REGINALD FOSTER	MISS E. HOPE BANCROFT
MISS THERESA L. MERRIAM	MRS. LANGDON MARVIN
MRS. THOMAS PELHAM CURTIS	MRS. HAROLD PEABODY
MISS ELIZABETH B. FAY	MRS. GEORGE CABOT LODGE
MISS ALICE FAY	MISS CLARA B. WINTHROP
MRS. JOHN L. BREMER	MISS EMILY BULLARD

MISS HILDA GREENLEAF

Executive Officers

Superintendent

FREDERIC A. WASHBURN, M.D.

Assistant Superintendent

EUGENE WALKER, M.D.

Surgical Board

Consulting Ophthalmic Surgeons

HENRY W. BRADFORD, M.D.	EDWIN E. JACK, M.D.
H. BECKLES CHANDLER, M.D.	FREDERICK E. CHENEY, M.D.
MYLES STANDISH, M.D.	HENRY H. HASKELL, M.D.

Consulting Aural Surgeons

J. ORNE GREEN, M.D.	CLARENCE J. BLAKE, M.D.
EDWARD M. PLUMMER, M.D.	

OFFICERS

Ophthalmic Chiefs of Service

ALEXANDER QUACKENBOSS, M.D. —————

Aural Chiefs of Service

FREDERICK L. JACK, M.D.

EUGENE A. CROCKETT, M.D.

Ophthalmic Surgeons

FRED M. SPALDING, M.D.

FREDERICK H. VERHOEFF, M.D.

A. GARDNER MORSE, M.D.

PETER H. THOMPSON, M.D.

GEORGE S. DERBY, M.D.

Aural Surgeons

PHILIP HAMMOND, M.D.

HARRIS P. MOSHER, M.D.

D. HAROLD WALKER, M.D.

WILLIAM F. KNOWLES, M.D.

Assistant Ophthalmic Surgeons

CHARLES D. JONES, M.D.

EDWARD K. ELLIS, M.D.

SAMUEL J. McDONALD, M.D.

P. SOMERS SMYTH, M.D.

W. HOLBROOK LOWELL, M.D.

WILLIAM N. SOUTER, M.D.

GEORGE H. RYDER, M.D.

WALTER B. LANCASTER, M.D.

Assistant Aural Surgeons

GEORGE H. POWERS, JR. M.D.

CALVIN B. FAUNCE, JR. M.D.

GEORGE L. TOBEY, JR. M.D.

FREDERICK L. BOGAN, M.D.

FRANCIS P. EMERSON, M.D.

DANA W. DRURY, M.D.

LEON E. WHITE, M.D.

JOHN H. BLODGETT, M.D.

Ophthalmic Clinical Assistants

RALPH A. HATCH, M.D.

HAROLD B. CHANDLER, M.D.

HENRY HAWKINS, M.D.

HENRY B. STEVENS, M.D.

HENRY G. CARROLL, M.D.

ROSS E. SAVAGE, M.D.

WILLIAM LIEBMAN, M.D.

THOMAS F. CAPELES, M.D.

ROLAND C. MACKENZIE, M.D.

FREDERICK N. STEPHENS, M.D.

Aural Clinical Assistants

JOHN L. LOUGEE, M.D.

WALTER H. YOUNG, M.D.

D. CAMPBELL SMYTH, M.D.

IRVING SOBOTKY, M.D.

OLIVER A. LOTHROP, M.D.

EDWARDS W. HERMAN, M.D.

ROBERT J. KISSOCK, M.D.

HAROLD G. TOBEY, M.D.

FRANKLIN CAMPBELL, M.D.

GEORGE H. POIRIER, M.D.

WILLIAM J. HARKINS, M.D.

CHARLES T. PORTER, M.D.

HARRY P. CAHILL, M.D.

WILLIAM I. WIGGIN, M.D.

Pathologist

FREDERICK H. VERHOEFF, M.D.

Consulting Neurologists

WALTER E. PAUL, M.D.

JAMES B. AYER, M.D.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Consulting Surgeons

SAMUEL J. MIXTER, M.D.

LINCOLN DAVIS, M.D.

Consulting Physicians

CHARLES W. TOWNSEND, M.D.

LOUIS G. MEAD, M.D.

THEODORE J. EASTMAN, M.D.

HARRY LINENTHAL, M.D.

GERALD BLAKE, M.D.

LESLEY H. SPOONER, M.D.

WILLIAM B. ROBBINS, M.D.

Physician to Children

FRITZ B. TALBOT, M.D.

Assistant Physician to Children

RICHARD M. SMITH, M.D.

Assistants in the Care of Children

J. HERBERT YOUNG, M.D.

JOHN W. HAMMOND, JR. M.D.

LOUIS W. GILBERT, M.D.

ARTHUR A. HOWARD, M.D.

RICHARD S. EUSTIS, M.D.

WILLIAM R. P. EMERSON, M.D.

Consulting Anæsthetist

ARTHUR M. DODGE, M.D.

Roentgenologist

WILLIAM LIEBMAN, M.D.

Refractionists

ROLAND C. MACKENZIE, M.D.

HAROLD B. CHANDLER, M.D.

House Staff

Ophthalmic House Surgeons

CLARENCE F. WORTHEN, M.D.

JOHN GILBERT, M.D.

JOHN G. JENNINGS, M.D.

EDWIN B. GOODALL, M.D.

Aural House Surgeons

M. RAY KENDALL, M.D.

ROBERT G. REAVES, M.D.

CLARENCE H. BIRDSALL, M.D.

WILLIAM G. MACKECHNIE, M.D.

Superintendent of Nurses

MARY COONAHAN, R.N.

Chief of Social Service

IDA M. CANNON

Report of the Board of Managers

THE Massachusetts Charitable Eye and Ear Infirmary was incorporated by a Special Act of the Legislature on Feb. 23, 1827. Since that time an enormous amount of charitable work has been done. The Infirmary is the second oldest hospital in New England and has a capacity of 219 beds (main hospital 161 beds, Gardner Building 33 beds, and Private Ward 25 beds); an Out-Patient Department; a Special Building containing the above-named 33 beds for the treatment of infectious ophthalmia and of contagious diseases developed in the wards of the Infirmary; a Pathological Laboratory; and a Nurses' Home, which make the Infirmary the largest hospital in the world for the treatment of diseases of the eye and ear.

During the past year, as shown in the Report of the Superintendent, the total number of patients admitted to the wards of the Hospital and treated in the Out-Patient Department was 80,033 (House Patients 4,016, Out-Patients 76,017).

HOUSE PATIENTS

Ophthalmic wards	1,858		
Aural wards	<u>2,158</u>		
Total number treated			4,016

OUT-PATIENT DEPARTMENT

New Patients

Ophthalmic

Males	10,604		
Females	<u>9,229</u>	19,833	

Aural

Males	5,851		
Females	<u>5,014</u>	<u>10,865</u>	30,698

Old Patients

Ophthalmic	25,224		
Aural	<u>20,095</u>	<u>45,319</u>	<u>76,017</u>
			80,033

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Of the House Patients 2,306 were males, 1,710 were females; of whom 1,597 were children under fourteen years of age. Daily average of patients was 158, total number of days' board furnished 57,850; for 28,342 days' board something was paid, and 29,508 days' board were free.

Of the Out-Patients (new) 13,725 came from Boston; 16,709 from Massachusetts outside of Boston; 240 from other New England States (the largest number from the State of New Hampshire); 18 from other States; and 6 from foreign countries.

Gardner Building

The Gardner Building has been of untold benefit, for therein every effort is made to prevent blindness, the value of which cannot be estimated. The cases herein treated were 273, and 149 of these cases were infants under one and one-half years of age. Fifty-three cases were transferred from the Infirmary, owing to infectious diseases which developed in the general wards.

Mr. George Augustus Gardner, who gave this building and who had a keen interest in and sympathy for human suffering, died Aug. 6, 1916. His name must always be associated with the Infirmary as a great benefactor.

An Endowment Fund is sadly needed to pay the running expenses of this building, in which case more children threatened with blindness could be treated. This is the most expensive part of the Infirmary to run, owing to the difficult and dangerous problems which are inseparable from the class of work done. A generous contribution of \$5,000 was made by a friend of the Infirmary in 1912 towards this worthy cause.

Pathological Laboratory

The pathological specimens accumulated during the last sixteen years now form a very complete collection of pathological specimens of the eye, probably the most complete collection extant. Every effort should be made to encourage research in ophthalmology.

Post-Graduate Training School for Nurses

Twenty-one years ago the Board of Managers established a Post-Graduate Training School for Nurses. Its object was to train a group of women in the care of the eye, ear, nose, and throat in such manner that it might become a great factor in saving sight and hearing. Students have come from all countries and after graduating have taken positions, giving the benefit of their knowledge far away from the Infirmary. Up to the present year there have been 390 graduates. Lectures, courses, and demonstrations are given to the students, and special instruction is also given in the operating rooms, in preparing infants' food and in Social Service work. The subjects covered were:

The Anatomy and Physiology of the Eye, Ear, Nose, and Throat.

The Nursing of the Diseases of the Eye, Ear, Nose, and Throat. Refraction; Bacteriology, and Materia Medica, pertaining to Otology and Ophthalmology.

Methods of teaching the Blind and Deaf.

Contagion.

Certain students from the Massachusetts General Hospital and the Waltham Hospital have during the past year taken a sixty days' course, and it is hoped that an arrangement can be made so that students from other representative schools may profit by the courses given.

Ladies' Visiting Committee

The Ladies' Visiting Committee, of which Mrs. Robert Shaw Russell is Chairman, authorized last year by the Board of Managers, has proved of value to the Infirmary and has great possibilities for the future. These ladies take turns in visiting the Infirmary and assist and cheer patients far from home who would not otherwise have visitors. They have given the Infirmary money for the salary of a Social Worker, who visits patients within the wards, plans for their occupation and

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

amusement, and acts as an agent of this Committee in directing them to patients who can be best assisted.

This Committee has done good work and has been very generous in many ways.

Visiting Staff

Last year we took an important step in the better care of children by appointing on the Visiting Staff of the Infirmary the members of the Children's Medical Department of the Massachusetts General Hospital, who make daily visits and attend to the physical condition of the children besides the eye and ear ailments. This present organization seems to be working successfully, and patients receive careful and needed attention.

Social Service Department

In common with other departments of the Infirmary this Department has made satisfactory progress. Social Service has been extended into the wards of the Infirmary. This was made possible through the generosity of the Ladies' Visiting Committee, who paid the salary of a worker. Closer relations have been established between the Social Service of the Infirmary, the State Department of Health, and the District Health Officers, through the holding of a conference.

In order to carry this work further an Endowment Fund is needed. In 1912, through the generosity of a friend of the Infirmary, \$5,000 was given towards this end.

RECEIPTS

Special fund	\$1,000.00
Income from Sears fund	960.00
Gifts	783.00
Transferred from income	2,964.08
	<hr/>
	\$5,707.08

Maintenance

The expenses and responsibilities of a hospital must each year increase rather than decrease, in order to carry on the work as the Board of Managers feel it should be done. Yearly contributions or gifts towards any special branch of the work of the Infirmary which happen to appeal to an individual are earnestly solicited.

The new building, completed in 1899, enabled the Managers to take care of a greater number of patients; but every year (with the exception of one) since that time there has been a deficit, varying from two to twenty-three thousand dollars, due in part to the Social Service work of the Infirmary. Deficits however cannot go on indefinitely.

The total cost of maintenance of the Hospital proper, Out-Patient Department, Gardner Building for Contagious Diseases, Pathological Laboratory, X-Ray Department, Social Service Department, and Nurses Home was \$153,981.03.

The cost per week per house patient was \$18.63.

The cost of subsistence per inmate per day was 27 cents.

Improvements

During the past year changes have been made on the fifth floor in order to afford surgeons connected with the Infirmary the convenience of a private ward to which they may be able to send a few patients.

The elevator has new hanging doors equipped with safety contacts, which means that the elevator cannot run unless all doors are closed.

Slate steps have been placed on the third and fourth floors.

Fire doors have been placed in the third floor, the fifth floor, and in the basement. Metal bases have been placed on doors and jams in the third and basement floors, which greatly improve the appearance of the halls.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

The Board of Managers desires to acknowledge with thanks the following Bequests and Gifts received during the past year:

BEQUESTS

John T. Wheelwright	\$2,000	
Mitchell A. Dearborn	<u>\$1,000</u>	\$3,000

GIFTS

Mrs. William J. Boardman	\$20	
Mrs. Allston Burr	10	
Mr. James Dean	30	
A Friend	5	
Mr. R. G. Fessenden	25	
Mrs. Reginald Foster	15	
Mrs. Henry Cabot Lodge	12	
Massachusetts Humane Society	500	
Mrs. Robert S. Russell	40	
Mr. Bartlett Reynolds	1	
Mr. Herbert M. Sears	100	
Mr. Philip S. Sears	<u>25</u>	\$783

Books and Magazines: Miss Breda Cross, Miss Clara Winthrop, Mrs. George C. Lodge, Dr. D. Harold Walker, Miss Mary Coonahan, Mr. T. A. Perkins, Mr. Harry Fiske, Mr. George Wooley, Mrs. Francis Curtis, Miss Eleanor C. Bancroft, Rev. E. C. Simpson, Old Corner Book Store, The Haskell School, Former Patient, Anonymous.

Children's Garments: Mrs. George C. Lodge.

Daily Newspapers: Mrs. Reginald Foster, Rev. A. E. George.

Embroidery and Knitting Materials: Mrs. Reginald Foster, Miss Ida E. Ridgeway, Miss M. M. Brackett.

Flowers: Mrs. Reginald Foster, Miss Ida E. Ridgeway, Miss Jessie M. C. Hume, Miss Elizabeth Fay, Miss Ida M. Cannon, Miss Marie R. Guillet, Mr. Frank E. LeCompte.

Fruit: Miss Breda Cross, Mrs. Reginald Foster.

Games: Mr. Eugene E. George, Miss Clara Winthrop.

Glasses: Miss Banks, E. Billings, Mrs. Cheney, Miss Harriet M. Bliss, Mrs. T. R. Sullivan, Miss Alkinson, Anonymous.

Ice Cream: Miss Rena White.

Knit Bandages: Mrs. G. A. King, Mrs. Charles Wells.

Playing Cards: Mr. and Mrs. Fay.

Playthings: Miss Amelia Schwarz, Miss Ida E. Ridgeway, Mr. Charles P. Curtis, Miss Margaret Manning, Miss Mary E. Aucoin, Francis Curtis, Massachusetts Commission for the Blind, Miss Mirriam L. Davison, Mrs. J. M. T. Curtis.

Salmon: Mr. Augustus Hemenway.

REPORT OF THE BOARD OF MANAGERS

Sweaters and Caps: Mrs. Robert S. Russell, Mrs. Francis Curtis.

Victor Records: Eastern Talking Machine Co., Miss Eleanor C. Bancroft.

Victrola Records, Loan of: Mrs. Reginald Foster.

Through the kindness and generosity of the following persons we were enabled to have a large Christmas tree, with presents for over two hundred patients and employees:

Mr. Charles P. Curtis
Mr. William C. Endicott
Mr. James Dean
Mr. Russell G. Fessenden
Mr. George P. Gardner
Mr. Augustus Hemenway
Mr. John Lawrence
Mr. James C. Howe

Mr. Robert Homans
Mr. Henry Parkman
Mr. Herbert M. Sears
Dr. George B. Shattuck
Mr. William D. Sohier
Mr. William S. Spaulding
Mr. Robert H. Stevenson, Jr.

WILLIAM C. ENDICOTT,
JAMES DEAN,
JAMES C. HOWE,

Committee of the Board of Managers.

Report of the Treasurer

Income, Receipts, and Disbursements

For the Year Ending September 30, 1916

INCOME

Receipts:

Received from investments	\$26,944.07	
Received from interest on bank deposits	740.53	
Received from State Treasurer	45,000.00	
Received from estate of R. B. Brigham	1,000.00	
Received from estate of E. V. Ashton	2,000.00	
Received from gifts	783.00	
	<hr/>	\$76,467.60

From Superintendent, as per his report:

Board of patients	\$25,855.87	
Out-patient visits	7,394.90	
Medicines.	10,555.91	
Optical Department	24,033.69	
X-Ray Department	1,042.15	
Miscellaneous	5,162.99	
	<hr/>	74,045.51

Excess of payments	<hr/>	1,826.44
		<hr/> \$152,339.55

Expenditures:

Running expenses of hospital per account of Superintendent		\$147,566.33
Sundries per Treasurer's account:		
Insurance, auditors, etc.		1,026.14
Gifts to Social Service work	\$783.00	
Transfer to Social Service work	2,964.08	3,747.08
	<hr/>	<hr/> \$152,339.55

SOCIAL SERVICE WORK

Receipts:

Received from gifts	\$783.00	
Received from special fund	1,000.00	
Received from income account	2,964.08	
Received from F. R. Sears account	960.00	
	<hr/>	\$5,707.08

REPORT OF THE TREASURER

Expenditures:

Wages	\$5,362.86	
Stationery, printing, etc.	78.20	
Street-car and railroad fares	134.73	
Postage stamps, telephone and sundries	131.29	
		<hr/>
		\$5,707.08

INVESTMENTS

Railroad Bonds

<i>Book Value</i>		<i>Par Value</i>
\$8,785.78	{ Atchison, Topeka & Santa Fe Ry. Gen. Mtge. 4% } { Atchison, Topeka & Santa Fe Ry. Adjustment 4% }	\$11,500.00
4,545.40	Atchison, Topeka & Santa Fe Ry. Convertible 4%	5,000.00
9,925.00	Boston & Albany R. R. Improvement 4%	10,000.00
1,000.00	Burlington & Missouri River R. R. Nebraska 6%	1,000.00
10,325.00	Canadian Pacific Ry. 6%	10,000.00
10,637.50	Chicago, Milwaukee & St. Paul R. R. 6%	10,000.00
10,287.50	Chicago, Burlington & Quincy R. R. Ills. Div. 4%	10,000.00
5,244.00	Cincinnati, Indianapolis, St. Louis & Chicago 6%	5,000.00
24,900.00	Chicago Junction Rys. & Union Stock Yards Mortgage 4%	25,000.00
10,400.00	Chesapeake & Ohio General Mortgage 4½%	10,000.00
10,500.00	Chicago City Ry. 5%	10,000.00
10,675.00	Fitchburg R. R. 4%	10,000.00
10,000.00	Iowa Falls & Sioux City 7%	10,000.00
4,502.50	Kansas City, Clinton & Springfield 5%	5,000.00
9,095.00	{ Kansas City, Memphis & Birmingham 4% } { Kansas City, Memphis & Birmingham 5% }	13,500.00
10,008.50	Kansas City, Memphis Ry. & Bridge Co. 5%	10,000.00
24,012.50	Long Island R. R. 4%	25,000.00
8,100.00	Michigan Cent. R. R. 3½%	10,000.00
13,776.70	New York Central & Hudson River R. R. 3½%	15,000.00
9,960.00	Northern Pacific Ry. 3%	15,000.00
9,450.00	Oregon Short Line 4%	10,000.00
10,000.00	St. Johnsbury & Lake Champlain 5%	10,000.00
<hr/>		<hr/>
\$226,130.38		\$241,000.00

MISCELLANEOUS BONDS

<i>Book Value</i>		<i>Par Value</i>
\$4,712.50	American Agricultural Chemical Co. 5%	\$5,000.00
19,271.53	American Tel. & Tel. Coll. Tr. 4%	21,000.00
8,000.00	Butte Electric & Power Co. 5%	8,000.00
9,550.00	California Gas & Electric Corporation 5%	10,000.00
14,700.00	Detroit Edison Co. 5%	15,000.00
<hr/>		<hr/>
\$56,234.03	<i>Amounts carried forward</i>	\$59,000.00

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

<i>Book Value</i>		<i>Par Value</i>
\$56,234.03	<i>Amounts brought forward</i>	\$59,000.00
4,582.64	Edison Electric Co. of Los Angeles 5%	5,000.00
9,850.00	Georgia Ry. & Electric Co. 5%	10,000.00
6,965.00	Louisville & Jeffersonville Bridge Co. 4%	7,000.00
6,700.00	Mass. Hospital Life Ins. Co.	6,700.00
4,900.00	Mass. Elec. Co. 5%	5,000.00
15,000.00	New Eng. Tel. & Tel. 5%	15,000.00
5,425.00	New York City 4½%	5,000.00
5,055.00	National Tube Co.	5,000.00
3,000.00	Savannah Electric Co. 5%	3,000.00
9,800.00	Southern California Edison Co. 5%	10,000.00
10,600.00	Seattle Electric Co. 5%	10,000.00
5,100.00	State of Massachusetts 3%	5,000.00
4,993.75	Swift & Co. 5%	5,000.00
14,693.75	United States Steel Corp. 5%	15,000.00
10,150.00	Tacoma Ry. & Power Co. 5%	10,000.00
4,975.00	United Electric Securities Co. 5%	5,000.00
5,037.50	Southern Bell Tel. 5%	5,000.00
<u>\$183,061.67</u>		<u>\$185,700.00</u>

RAILROAD STOCKS

<i>No. of Shares</i>		<i>Book Value</i>
135	Atchison, Topeka & Santa Fe Ry. Preferred	\$10,792.66
16	Boston & Maine R. R. Common	840.00
2	Boston & Providence R. R.	510.00
100	Chicago Junction Rys. & Union Stock Yards Preferred	11,907.50
25	Concord & Montreal R. R.	1,346.25
62	Chicago & Northwestern R. R. Common	7,981.25
21	Fitchburg R. R. Preferred	2,063.13
20	Manchester & Lawrence R. R.	1,830.00
100	Manhattan Railway	14,187.50
50	New York Central & Hudson River R. R.	5,881.25
15	Northern R. R.	1,215.00
4	New York, New Haven & Hartford R. R.	315.50
100	Union Pacific R. R. Preferred	8,156.25
5	Vermont & Mass. R. R.	410.00
		<u>\$67,436.29</u>

REAL ESTATE

<i>No. of Shares</i>		<i>Book Value</i>
10	Boston Real Estate Trust	\$10,260.75
15	Boston Ground Rent Trust	1,500.00
5	Providence Building Trust	500.00
2	Devonshire Building Trust	200.00
5	Warren Chambers Trust	500.00
		<u>\$12,960.75</u>

REPORT OF THE TREASURER

MISCELLANEOUS STOCKS

<i>No. of Shares</i>		<i>Book Value</i>
246	American Tel. & Tel. Co.	\$30,286.62
100	American Sugar Refining Co. Preferred	11,680.75
250	Ballard Vale Mills Preferred	25,000.00
3	Edison Electric Illuminating Co.	781.50
58	Mass. Elec. Preferred	5,000.00
3	N. E. Tel. & Tel.	399.75
9	Boston Personal Property Trust	990.00
104	West End St. Ry. Common	7,518.70
8	Western Union Tel. Co.	504.00
3	Walter Baker Co., Ltd.	1,200.00
		<hr/>
		\$83,633.32

SUMMARY

Stocks and Bonds: Investments (book value)	\$573,222.41
New Infirmary	347,400.44
Nurses' Home, land and building	204,205.27
Laboratory	11,735.91
Cash on hand and in Superintendent's hands	45,901.35
	<hr/>
	\$1,182,465.38

LIABILITIES

Capital, including various funds and legacies	\$1,182,465.38
---	----------------

Report of the Superintendent

TO THE BOARD OF MANAGERS :

Gentlemen : — I have the honor to submit to you, herewith, my second Annual Report as Superintendent of the Massachusetts Charitable Eye and Ear Infirmary.

The year has been one of successful progress. Patients have had better and more careful attention. Many physical improvements have been made at the Infirmary building.

The Ladies' Visiting Committee has proved of great value to us and is developing possibilities for the future. They have been much interested in the work of the Infirmary, and many of them have given us a great deal of their time and thought. They have also given the money which has made it possible for us to have a Social Worker in the wards.

The care of the children at the Infirmary has received better attention than ever in the past because of the visits of the Specialists in Children's Diseases appointed on our Staff, as noted in the last report.

Two additional House Officers are now maintained, one on each service. This tends also to the better care of the patients.

Increased and better nursing service has been provided. A reference to Miss Coonahan's report will show that the Infirmary maintains fifty-six graduate and pupil nurses as opposed to thirty-nine two years ago.

Dr. Charles E. Wells has resigned as Assistant Superintendent, and Dr. Eugene Walker was appointed to succeed him.

Attention is invited to the tables of statistics which follow, and the appended reports.

I wish to thank your Board for the uniform courtesy extended to the Administration, and to express to you my appreciation of the satisfactory services of officers, nurses, and employees.

REPORT OF THE SUPERINTENDENT

Statistics of House Patients

The total number of patients treated in the wards was 4,016.

Of the 4,016 house patients, 2,306 were males and 1,710 were females.

Number of patients treated in ophthalmic wards 1,858

Number of patients treated in aural wards 2,158

Of this number 273 were treated in the Gardner Building for contagious diseases; 149 of these were infants under one and one-half years of age. A report on the special work in the Gardner Building follows. The average number of patients treated daily in this building was 15+.

Number of children treated in the wards:

Under 2 years of age 276

From 2 to 7 years of age 543

From 7 to 14 years of age 778

1,597

The average number of patients treated daily in the wards was 158+.

The largest number of house patients treated on any one day was 177; the smallest number, 111.

Number of free patients 1,099

Number of patients admitted at \$28 per week 15

Number of patients admitted at \$15 per week 474

Number of patients admitted at \$10.50 per week 1,037

Number of patients admitted at less than \$10.50 per week 1,253

Patients remaining in wards Sept. 30, 1915 138

The average stay per patient in the hospital under treatment was 14+ days.

57,850 days' board was furnished to patients. For 28,342 days' board something was paid, and 29,508 days' board were free.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Residences of House Patients

Boston	1,391	Rhode Island	13
Massachusetts (excepting Boston)	2,484	Connecticut	4
Maine	16	Other States	4
New Hampshire	80	Canada	5
Vermont	19	Total	4,016

Occupations of House Patients

MALES, OPHTHALMIC

Agents	6	Pensioners	8
Bakers	3	Physicians	5
Barbers	5	Plumbers	8
Blacksmiths	13	Policeman	1
Butcher	1	Porters	11
Carpenters	38	Printers	5
Chauffeurs	4	Railroad employees	26
Clerks	23	Salesmen	8
Coachmen	8	Seamen & fishermen	19
Cooks	6	Shipper	1
Draughtsman	1	Shoemakers	3
Electricians	4	Soldiers	2
Engineers	9	Students	7
Farmers	15	Stonecutters	16
Firemen	6	Storekeeper	1
Gardeners	10	Tailors	4
Janitors	7	Teachers	2
Laborers	136	Teamsters	16
Machinists	45	Waiters	4
Masons	7	Watchmen	5
Metal workers & moulders	22	Unclassified	179
Mill & factory operatives	140	Minors	328
Nurses	4	Total	1,199
Painters & glaziers	15		
Pedlers	12		

MALES, AURAL

Agents	3	Chauffeurs	10
Bakers and cooks	8	Clerks	48
Barbers	8	Electricians	13
Blacksmiths	5	Engineers	6
Bookbinders	2	Farmers	5
Bookkeeper	1	Firemen	4
Carpenters & woodworkers	19	Gardeners	4

REPORT OF THE SUPERINTENDENT

Hospital attendants	9	Storekeeper	1
Janitors	6	Soldiers	2
Laborers	45	Stonecutters	3
Letter-carriers	3	Waiters	6
Machinists	9	Watchmen	2
Masons	2	Railroad employees	12
Metal workers & moulders	7	Students	34
Mill & factory operators	84	Tailors	12
Painters & glaziers	12	Teamsters	14
Plumbers	5	Minors	660
Porters	14	Unclassified	27
Pedlers	2		
Physicians	3	Total	1,117
Salesmen	7		

FEMALES, OPHTHALMIC

Attendant	1	Salesman	1
Bookkeeper	1	Stenographers	2
Clerks	6	Students	4
Cooks	11	Telephone operator	1
Domestics	60	Waitresses	12
Dressmakers	13	Minors	229
Housewives	185	Unclassified	99
Mill & factory operatives	27		
Nurses	7	Total	659

FEMALES, AURAL

Actress	1	Nurses	17
Attendants	12	Saleswomen	11
Bookkeepers	3	Stenographers	6
Clerks	19	Students	34
Cooks	10	Social Service workers	2
Domestics	76	Teachers	3
Dressmakers	13	Telephone operator	1
Housewives	153	Waitresses	9
Laundresses	5	Minors	588
Manicurists	2	Unclassified	25
Mill & factory operatives	49		
Milliners	2	Total	1,041

Condition of House Patients at Discharge

469 were well.	45 died.
3,164 were relieved.	25 were transferred to other hospitals for different diseases.
114 were not relieved.	127 remaining in hospital Sept. 30, 1916.
58 left against advice.	
14 were not treated.	

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Number of Operations

In the Ophthalmic Departments there were 1,009 operations performed in the house, and 2,519 in the Out-Patient Department.

In the Aural Departments there were 1,935 operations performed in the house, and 1,407 in the Out-Patient Department.

Out-Patient Department

New Patients treated:			
Ophthalmic: Males	10,604		
Females	9,229	19,833	
Aural: Males	5,851		
Females	5,014	10,865	
Total		30,698	
Old Patients treated:			
Ophthalmic.	25,224		
Aural	20,095	45,319	
Total visits in Out-Patient Department		76,017	

Residences of Out-Patients

Boston	13,725	Connecticut	9
Massachusetts	16,709	Other States	18
Maine	45	Canada	4
New Hampshire	129	Other countries	2
Vermont	30		
Rhode Island	27	Total	30,698

Occupations of Out-Patients

Actors	14	Bookbinders	103
Agents	70	Bookkeepers	142
Barbers	157	Butchers	91
Bakers	86	Carpenters	413
Blacksmiths	166	Chauffeurs	136

REPORT OF THE SUPERINTENDENT

Clergymen	20	Painters	245
Clerks	1,203	Pedlers	205
Coachmen & hostlers . . .	99	Pensioners	177
Compositors & printers . .	185	Photographers	27
Cooks	167	Physicians and dentists . .	18
Domestics	816	Plumbers	119
Draughtsmen	30	Policemen & letter carriers .	108
Electricians	155	Porters	131
Engineers	153	Railroad employees	347
Engravers	49	Seamstresses	348
Farmers	218	Shoemakers	263
Firemen	199	Soldiers	67
Fishermen	150	Stenographers	164
Housewives	4,493	Stonecutters	178
Hotel keepers	57	Storekeepers	63
Laborers	1,244	Students	116
Lawyers	9	Tailors	457
Machinists	971	Teachers	109
Masons	98	Teamsters	451
Messengers	41	Telephone operators . . .	135
Mill & factory employees .	2,645	Waiters	208
Milliners	37	Unclassified	3,165
Moulders & iron workers .	246	Minors	8,752
Musicians	38		
Nurses	144	Total	30,698

Comparative Financial Statements

For the Fiscal Years 1915 and 1916

OPERATING EXPENSES		1916	1915	HOSPITAL RECEIPTS		1916	1915
SALARIES AND WAGES							
Officers and Clerks		\$7,712.18	\$7,854.71	Board of Patients		\$25,855.87	\$18,848.83
Telephone Operators		828.82	621.43	X-Ray		1,042.15	516.60
Out-Patient Dept. Clerks		2,987.28	2,490.48	Wassermann Tests		361.00	363.95
Social Service Workers		5,362.86	4,717.12	Fixation Tests		8.00	2.00
Druggists		1,781.09	1,997.17	Salvarsan		8.10	68.00
Opticians		2,614.03	996.53	Surgical Dressings		51.05	18.53
Refractionists		1,300.00	1,149.84	Special Nurses		873.00	358.71
Supt. of Nurses and Assistants		2,535.00	2,280.00	Optical		24,033.69	14,997.34
Head Nurses and Assistants		6,306.82	6,740.28	Apothecary		10,555.91	8,946.96
Post-Graduate Nurses		802.00	1,088.16	O. P. D. Door Fees		7,394.90	6,254.50
Special Nurses		1,625.21	1,219.78	Throat Patients' Board		2,206.55	1,638.75
Attendant Nurses		4,767.01	4,649.64	Records		265.75	211.00
Pupil Nurses		438.21	114.01	Certificates		164.30	74.50
Orderlies		3,466.10	3,891.76	Telephone and Telegraph		97.34	71.89
Ward Maids		1,301.98	987.47	Interest		135.45	67.65
X-Ray Dept.		1,260.08	1,237.81	Stamps		54.93	12.07
Pathological Laboratory		1,675.44	1,705.00	Grease and Bones		144.39	112.52
Store		60.00	45.00	Miscellaneous		793.13	1,023.83
Housekeeping and Kitchen				TOTAL HOSPITAL RECEIPTS		\$74,045.51	\$53,587.63
Wages		9,555.06	7,348.90	FROM TREASURER		76,500.00	88,919.20
Laundry		2,952.42	2,701.10			\$150,545.51	\$142,506.83
Maintenance, Property and Plant		7,592.42	6,049.96	Oct. 1, 1916, Debit bal. \$3,380.37 }			
				Oct. 1, 1915, Cash on hand \$55.15 }		3,435.52	55.15
				Oct. 1, 1915, Cash on hand			
TOTAL SALARIES AND WAGES		\$66,924.01	\$59,886.15	TOTAL RECEIPTS		\$153,981.03	\$142,451.68

REPORT OF THE SUPERINTENDENT

OPERATING EXPENSES		1916	1915	SUMMARY	
SUPPLIES				1916	1915
General	Administration Ex-			OPERATING EXPENSES	
penses				Salaries and Wages	
		\$4,824.29	\$5,121.26	Supplies	\$66,924.01
Apparatus and Instruments		1,930.37	3,122.12		87,057.02
Medical and Surgical Supplies		9,564.05	11,535.72	TOTAL EXPENSES	\$153,981.03
Wassermann Tests		260.00	395.50		\$142,451.68
X-Ray		447.01	398.06		
Housekeeping and Kitchen					
Supplies		7,466.48	7,529.35	TOTAL HOSPITAL RECEIPTS	\$74,045.51
Laundry		550.31	1,065.82	Necessary to Balance Account	79,935.52
Meat, Poultry and Fish		9,461.21	8,591.90		\$153,981.03
Fruit and Vegetables		3,394.93	2,335.22		\$142,451.68
Bread and Flour		1,567.18	1,318.70		
Milk and Cream		4,719.67	4,733.16		
Groceries		4,629.34	4,562.63		
Butter and Eggs		3,657.35	2,952.19		
Gas		677.68	198.64		
Electric Lighting, Nurses' Home		509.95	951.60		
Heat, Light and Power, Hospital					
Buildings		9,999.96	9,999.99		
Ice		1,215.13	1,218.91		
Fuel, Hospital Buildings		510.64	609.50		
Fuel, Nurses' Home		1,035.26	854.14		
Water, Hospital Buildings		1,754.40	1,197.60		
Water, Nurses' Home		254.45	160.50		
Maintenance, Property and					
Plant		10,047.64	6,117.76		
Refunds		614.42	447.67		
Miscellaneous		489.06	115.38		
Optical		7,476.24	7,032.21		
TOTAL SUPPLIES		\$87,057.02	\$82,565.53		

Special Report on the Work of the Gardner Building

During the past year 273 patients were treated in the special wards of the Gardner Building. Of these there were 64 cases of gonorrheal ophthalmia, 4 occurring in adults, 5 in children, and 55 in infants soon after birth. There were 62 cases of purulent ophthalmia, non-gonorrheal, all of these occurring in infants. At the time of entrance the cornea was involved in 6 cases of gonorrhea, of which 1 was an adult, 2 children, and 3 infants. Four of these were clear on discharge, and 2, both children, were not. The cornea became involved in 5 after admission, of which 1 was an adult, 3 children, and 1 an infant.

There were also 33 cases of trachoma, 15 cases of gonorrheal conjunctivitis, 32 cases of non-gonorrheal conjunctivitis, 2 cases of phlyctenular conjunctivitis, 7 gonorrheal vaginitis, 3 blepharitis, 1 glaucoma, and 1 iridocyclitis treated.

One Saemisch's operation was performed.

Fifty-three patients were transferred to the Gardner Building for measles, scarlet fever, pertussis, erysipelas, and other infectious diseases which manifested themselves in the general wards of the hospital.

REPORT OF THE SUPERINTENDENT

A Comparative Report of the Work of the Infirmary for the Last Ten Years

Report of the House and Out-Patient departments from Sept. 30, 1907, to Oct. 1, 1916, showing the yearly change in the number of new patients and number of visits in each department.

Year	House Patients		Out-Patients				Total
	Ophthalmic	Aural	Ophthalmic New	Aural New	Ophthalmic Old	Aural Old	
1907	1,628	1,578	24,012	8,919	29,835	25,295	91,267
1908	1,524	1,645	21,113	9,449	25,202	22,729	81,662
1909	1,396	1,719	19,375	9,128	20,153	18,398	70,169
1910	1,646	1,910	19,542	9,364	18,508	16,695	67,665
1911	1,700	1,749	20,408	9,467	17,273	14,493	65,090
1912	1,646	1,874	19,265	9,182	16,412	13,396	61,775
1913	1,756	1,896	19,853	10,159	15,319	12,731	61,714
1914	1,805	1,825	18,734	9,942	15,840	14,256	62,402
1915	1,794	1,852	18,689	9,837	20,611	18,489	71,272
1916	1,858	2,158	19,833	10,865	25,224	20,095	80,033

Yours very respectfully,

FREDERIC A. WASHBURN,

Superintendent.

Post-Graduate Training School

THE Post-Graduate Training School for Nurses of the Massachusetts Charitable Eye and Ear Infirmary has entered its twenty-second year and has graduated 390 students.

In the school year of 1915-16, 50 students were entered, an increase of 19 over the previous year; 45 students graduated; 5 students failed to graduate. There were 73 applications, an increase of 27 over 1915; and 130 inquiries, an increase of 60 over the last report.

The theoretical training has been simplified, amplified, and more definitely related to the practical work. Exclusive of daily bedside instruction, 250 hours of theory have been given in lectures, classes, and demonstrations. The subjects covered were:

The Anatomy and Physiology of the Eye, Ear, Nose, and Throat.

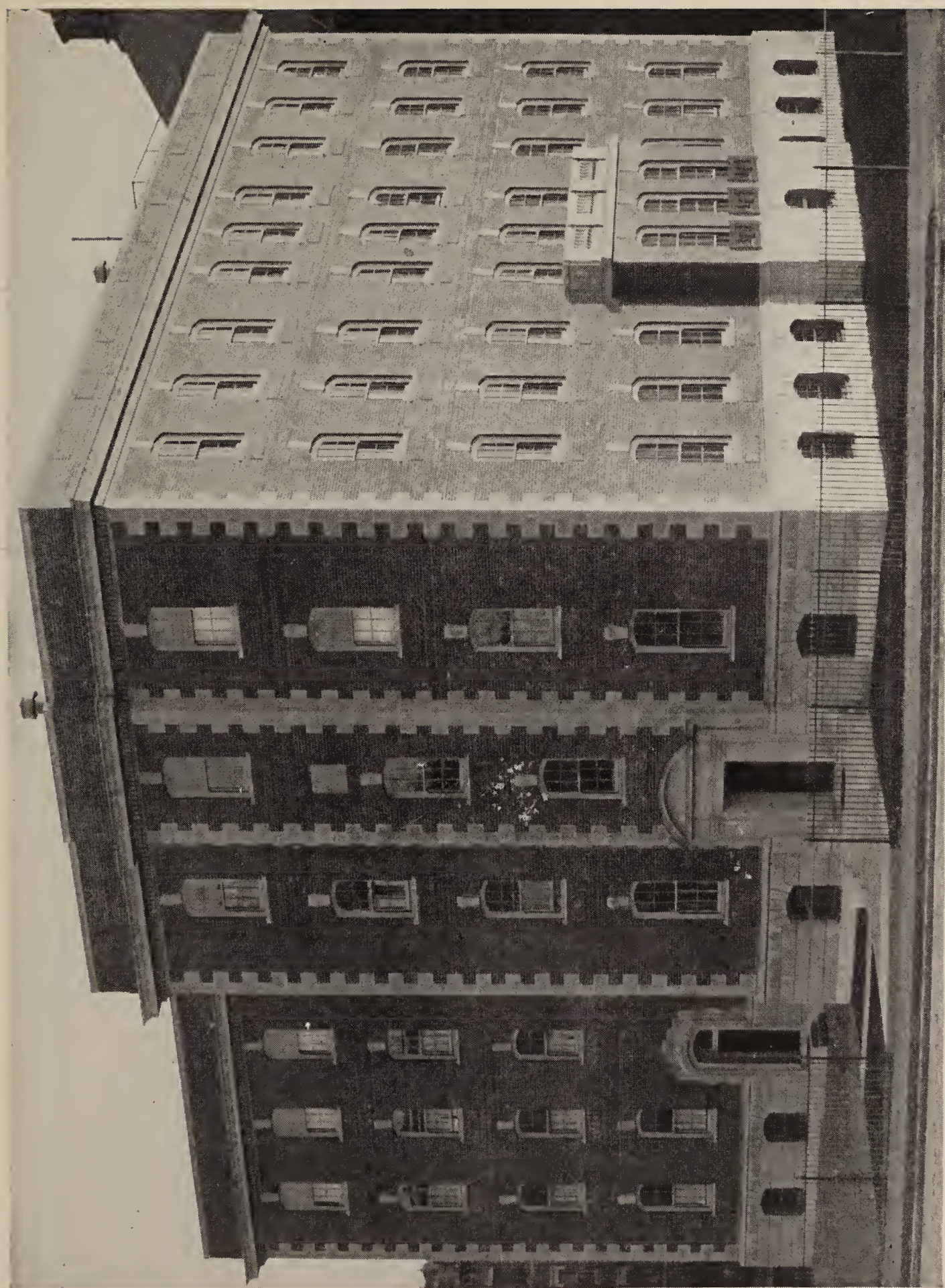
The Nursing of the Diseases of the Eye, Ear, Nose, and Throat. Refraction; Bacteriology, and Materia Medica, pertaining to Otology and Ophthalmology.

Methods of teaching the Blind and Deaf.

Contagion.

The practical training given by special instructors at the bedside has been developed; starting with the simple technique of holding an eye dropper and cotton ball, the student is instructed in detail until capable of doing any ophthalmic or aural nursing. The immediate result has been a more fixed method of work in all departments of the Infirmary and a more efficient nurse when the student must assume responsibility.

The constructive work has been as follows: The nursing work has been rearranged so that the greater part of the nursing care of the patient is done by graduate and student nurses. The attendant is excluded, as far as possible, from the actual nursing



NURSES' HOME
OPENED AUGUST 5, 1909

POST-GRADUATE TRAINING SCHOOL

of the patient. Her work consists of the routine ward work, the serving of diets, the care of linen, clothing, bathing and other bodily care of the patient, and nursery work. Her further exclusion from the nursing is planned as the number of student nurses increases. At the present time all operating-room work, all of the out-patient work, all of the care of the patient seriously ill, and the greater part of all treatments are done by the nurses.

A surgical supervisor has been appointed. Her duties are the management of the operating rooms; the supervision of the operating nurses; the supervision of the anæsthetists; the training of the student nurse in operating technique and surgical nursing; and, under direction of the Consulting Anæsthetist, the training of students in the giving of anæsthesia. She also directs the set-up of dressing cars and the use of surgical dressing. The direct result has been a better operating service, nurses trained to take charge of any aural or ophthalmic operating, a selected number of nurses competent to anæsthetize, and the lessened consumption of gauze, dressings and ether.

The nursing staff has been increased. When the full number of hospital wards are open, there will be 56 workers against 39 two years ago.

The affiliations made with general hospital training schools have strengthened, and several schools not sending pupils are much interested in the work done here and may arrange to send pupils in the near future. During the past year there has been an increased demand for the nurses from the Infirmary, especially from hospitals having eye and ear departments.

During the coming year it is hoped that among the things accomplished will be further standardization of nursing work in the Infirmary, and for this the sympathy and co-operation of the Medical Staff is earnestly besought. The first step has been taken in arranging for "lay-outs" for operations in the aural operating rooms and has proven most advantageous. Could some standard be developed for all "standing orders," for arrangement of dressings, and preparation of patient for operation, it would produce more than any other one thing smoothness and

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

efficiency in the nursing department. At present varied methods are in vogue which make it difficult for the nurse to anticipate what is desired.

The provision for the personal care of the nursing staff is good. All the comforts and many of the luxuries of good living are theirs. A new Edison victrola was installed at the Home last winter, and it has been a source of much pleasure. Current magazines and papers are in the library. The Ladies' Visiting Committee has been most kind and attentive to the nurses' needs. Mrs. Robert S. Russell frequently sends new novels and flowers. Miss Theresa Merriman arranged for a dancing class during the winter and not only sent a teacher, but spent one evening each week with the nurses at the Home.

The general health of the nurses has been excellent, no nurse has been seriously ill, and the minor illnesses have been less than usual. The greater number have shown a marked improvement in physical condition while here; a group of ten selected at random showed an average gain in weight of five pounds in two months.

Again the Superintendent of Nurses expresses the thanks and appreciation of the Nursing Staff for the courtesies shown to them, their indebtedness to the Visiting Surgeons and Internes who have given unfailingly of time and labor in teaching, and to the Administration that has so generously provided for their needs.

MARY COONAHAN, R.N.,
Superintendent of Nurses.

Report of Social Service

IN last year's report we stated that the next important step in the organization of Medical Social Service for the Eye and Ear Infirmary should be the establishment of a closer and more effective relation between the various public health activities of the State and the special kind of service this hospital and dispensary gives to its patients. Some definite steps have been taken this year to develop this plan. Following a conference with the State Department of Health and the District Health Officers, a cordial and helpful co-operation has been established. Many public health nurses in the various cities and towns from which our patients come have been sought out and been found eager to do their part.

Co-operation with the City's Health Center

What can be accomplished for the patient through co-operation of public health nurses and a social service department has been demonstrated this year. Many children with chronic and acute infections of the eye or ear need to have home treatment to supplement that received at the Clinic. During two months this summer 97 such patients were referred to the Health Center on Blossom Street. Through the interest of the instructive district nurse stationed there, these patients were visited at home, and their mothers were taught to give the necessary irrigation or to apply the prescribed ointment. The marked improvement in the children's condition and the more regular attendance at the Clinic were striking. Of these 97 children, 72 were referred from the Ear Clinic. Many of them were cases of chronic otitis media. It was quite evident to us after this experiment that there is need for a medical social worker especially assigned to the Ear Clinic. Many of the children whose condition, becoming chronic, necessi-

tates attendance at the Clinic for many weeks or months might be given active home treatment in the acute stage. To do this successfully there should be assigned to the Clinic a special worker who could receive all patients for whom the doctors prescribe supplementary home treatment. The social worker, knowing the visiting nursing facilities of the State, could then refer these patients to the nurses for home instruction. By these means many cases of chronic disease might be prevented.

Need for Instruction of Public Health Nurses in Diseases of the Eye and Ear

The greatest difficulty that has been encountered in working out the plan of co-operation with public health nurses has been not in any lack of willingness on the nurses' part to be helpful, but rather in a lack of knowledge on their part concerning the diseases of the eye and ear and their nursing treatment. Most of the schools for nurses have little or no instruction in this special subject. It has sometimes been difficult, therefore, to refer our patients to public health nurses with the same assurance that would prompt the referring of a patient needing general nursing. To meet their lack, some of the nurses have come to the Clinic for special instruction.

It is hoped that during the next year arrangements may be made to hold special clinics and lecture-conferences at the Infirmary for the instruction of public health nurses in the eye and ear diseases and their treatment. The Infirmary has a very valuable contribution to make to the training of nurses going into public health work.

Ophthalmia Neonatorum

There have been referred to the Social Service Department 140 babies afflicted with ophthalmia neonatorum. A special worker, as in previous years, has been in charge of this group of patients. Her functions are:

First, to get an accurate history and any evidence of medical

REPORT OF SOCIAL SERVICE

neglect of the child's eyes previous to admission; this is to supplement the doctor's history.

Second, to secure as far as possible breast feeding for all babies admitted to the Gardner Ward. Arrangements are made if possible for the mothers to come to nurse their babies. If this is impossible, plans are sought for sending the mother's milk to the Infirmary.

Third, to persuade all parents of babies with gonococcus infections to have necessary treatment.

Fourth, to plan for hygiene supervision of the babies after discharge, not only for care of the eyes, but for general care and feeding. When possible the mothers are referred to baby welfare stations for instruction.

Fifth, to report to the Commission for the Blind all cases showing medical neglect and all cases with scarred cornea.

Entire or partial breast feeding was secured for 74 of the 120 babies admitted to the Gardner Ward. Two babies were discharged blind, and only 6 others had to be reported to the Commission.

Many of these babies resided outside of greater Boston, this year about 40 per cent. In the larger communities where there is an active Board of Health with a nurse, it is usually possible to secure their assistance in carrying out the work as outlined. The more difficult problems come from the smaller communities. Through the help of the State District Health Officers we are now able to see that the babies coming from smaller towns and rural communities are much more efficiently cared for than they ever have been before. We find we can count on these officers for aggressive action in following up cases of neglect and often in making possible the sending of the mother's milk and the treatment of the parents who need it.

Special Care for Patients with Interstitial Keratitis

A special study of patients with interstitial keratitis has been made during the last eight months under the supervision of Dr. Abner Post of the Syphilis Clinic of the Massachusetts General

Hospital, and with the co-operation of members of the Ophthalmological Staff at the Eye and Ear Infirmary. Through the interest of the Perkins Kindergarten for the Blind a social worker has been employed. It has been the social worker's part to secure the additional social data significant to the study, to keep the patient under active treatment and supervision of both the Eye and Ear Infirmary and the Syphilis Clinic at the Massachusetts General Hospital. A full report of this study is forthcoming, but its findings are so important to the development of Social Service that it may be well to call attention to some of the facts that have been disclosed. Of especial interest is the group of 50 school children, who during this period made 545 visits to the Massachusetts General Hospital and 660 visits to the Infirmary. In many instances this required careful planning with the parents and special arrangements for carfares, because only 14 of the patients came from Boston, and 12 of them came from distances more than 20 miles away. Only 2 of these children have lost no time in school, the others having lost varying periods from three months to four years. The problem of the child with interstitial keratitis is therefore not merely a medical problem, but an educational and social one as well. The Commission for the Blind has many times emphasized this fact.

From the point of view of the Social Service Department this study has very clearly and forcibly emphasized the urgent necessity of having a special worker who understands the significance of this disease, who knows how to secure and maintain the confidence of the patient and his family, and who can keep the patient coming faithfully for treatment even after he may see no need. The study showed that some of these children must be excluded from school altogether because of the marked eye strain. This does not mean, however, that some form of education is not possible, and it should be provided. Other children can attend school part time, if special attention is given to suitable seating, lighting, and protection from overstrain. Unless the child can be assigned to one of the few special classes for defective eyesight, these arrangements must be made with the teacher for the

REPORT OF SOCIAL SERVICE

individual child by someone who knows well the child's limitation.

It is earnestly urged that some provision be made to continue the Social Service as started for this group. The usefulness of the social worker is not limited by the individual patient. The child is often the avenue through which other members of the family may be brought to the hospital for necessary treatment. It is quite evident that here lies an important opportunity for preventive work.

Social Service for Out-Patients

An attempt has been made this year to differentiate the various types of social service required to meet the needs of patients as they were referred to us. The total number of patients referred was 1663. The treatments of these patients from a social point of view were discriminated as follows:

First, patients whose social and hygienic condition necessitated active social work and home visiting. There were 487 in this group.

Second, patients whose need can be met adequately through clinic social work at the Infirmary. There were 931 in this group.

Third, patients who need clearly to understand when they are to return, and what treatment they need to follow, and who can then be kept track of through a follow-up system. There were 245 in this group. Of this last group 130 were eye patients and 115 ear patients.

The social workers of the Department believe that the next and most urgent step in bettering our work should be the installation of an adequate follow-up system for both clinics. The desirability of this provision was revealed through three studies which were made with Dr. Derby's helpful interest by special students in medical social service during the past year:

1. A study of congenital cataract, based on the medical records of 80 patients and visits to homes of 25 patients.

2. An examination of the records of 532 patients admitted to the Out-Patient Department during September, 1915.

3. An analysis of clinical records of all new cases of myopia coming to the Infirmary during 1915.

These studies give ample evidence of the need of a follow-up system. From them and from personal experience we have come to believe that any follow-up system, to be successful, must have, as a supplement to its mechanical features, personal interest in the patient, a conception of the necessity of persistence in treatment, and such a background of knowledge of the patients as will make it possible to instruct them intelligently in the practice of personal hygiene, often essential to successful treatment of eye and ear disease. A well-organized follow-up system would make it possible for the doctors easily to follow special groups of cases. It would also mean that such serious diseases as glaucoma, congenital cataract, and interstitial keratitis would be kept under more constant treatment than at present.

Social Service for Ward Patients

This year has seen the extension of social service into the wards, a development that has long been needed. It has been made possible through the lady visitors, who have contributed the necessary salary for the worker. The many patients referred for convalescent care have revealed the urgent need of some special provision for such patients for a week or two after discharge from the wards. This is particularly needed for the patients with diseases of the ear.

The library for the patients has been kept in circulation, and occupation, such as knitting, for the women, has been promoted. Through the Wheelock Kindergarten School two students came daily through the winter to entertain and instruct the children in the nursery.

Since the special worker has been assigned to the wards it has been more consistently possible to watch for and refer patients with low vision to the Commission for the Blind.

More volunteer service is needed for recataloguing and taking charge of the library, and for the supervision of recreation in the

REPORT OF SOCIAL SERVICE

nursery during the summer. Suitable occupation for the men and older boys should be developed.

Several changes have occurred in the staff of workers. Most important was the appointment in April of Miss Jessie M. C. Hume as Head Worker.

IDA M. CANNON,
Chief of Social Service.

Report of the Pathological Laboratory

DURING the past year the pathological collection of the laboratory has been enriched by the addition of a number of unusual specimens, descriptions of which will be published in due course of time. Experimental investigations have been carried on concerning the possible bactericidal value of heat in the treatment of corneal ulcers, concerning the cause and treatment of glaucoma, and concerning the operative treatment of separation of the retina. The method finally worked out for the treatment of separation of the retina has just been tried in one clinical case with success, and it is believed that it will yield at least a fair number of successful results in this hitherto practically hopeless condition. The experiments relating to the effect of heat on corneal ulcers have unfortunately failed to confirm the claims that have been made for this method of treatment. The material of the laboratory is being made of service for teaching purposes more and more.

In past years I have repeatedly called attention to the need of an endowment fund to encourage research in ophthalmology. This fund could be utilized to the best advantage by establishing a graduate school of ophthalmology. Such a school would contribute to the advancement of ophthalmology in various ways: it would insure that the graduates had a real knowledge of their specialty before beginning practice; it would insure better service to the Infirmary, owing to the improved training of the house officers and attending surgeons; and most important of all, at least at the present time, it would enable men who were fitted for research work to make evident their qualifications and inclinations in this direction.

FREDERICK H. VERHOEFF, M.D.,

Pathologist.

Scientific Papers Published by the Surgical Staff during the Year 1916

- "The Pathological Effects of Radiant Energy on the Eye." By Frederick H. Verhoeff, M.D., and Louis Bell, Ph.D. With "A Systematic Review of the Literature" by Clifford B. Walker, M.D. *Proceedings of the American Academy of Arts and Sciences*, Vol. 51, No. 13, 1916.
- "A Simple Operation for Contracted Socket." By Frederick H. Verhoeff, M.D. *The Ophthalmic Record*, March, 1916.
- "A Case of Syphilitic Retinochoroiditis Juxtapapillaris, with Microscopic Examination." By Frederick H. Verhoeff, M.D. *Archives of Ophthalmology*, No. 4, 1916.
- "Histological Findings after Iridotomy." By Frederick H. Verhoeff, M.D. *Archives of Ophthalmology*, No. 1, 1916.
- "Improved Capsule Forceps for Intracapsular Extractions." By Frederick H. Verhoeff, M.D. *Archives of Ophthalmology*, No. 5, 1916.
- "The Wire Gauze Brain Drain." By Harris Peyton Mosher, M.D. *Transactions of the American Laryngological, Rhinological, and Otological Society*, 22d Annual Meeting.
- "Loss of Sight from Retrobulbar Neuritis due to Accessory Sinus Disease, with Report of Two Cases." By Leon E. White, M.D. *Boston Medical and Surgical Journal*, June 1, 1916.
- "A Simple Tonometer for Clinical Use." By Wm. Norwood Souter, M.D. *The Ophthalmic Record*, February, 1916.
- "Eye Changes in Renal Diseases — Their Diagnostic and Prognostic Value." By Peter Hunter Thompson, M.D. *Boston Medical and Surgical Journal*, August 3, 1916.
- "A Case of Botulism." By Walter B. Lancaster, M.D. *Transactions of American Ophthalmological Society*, Vol. 14, p. 648.
- "Preparation of the Patient for Operation." By Walter B. Lancaster, M.D. *Transactions of the Section on Ophthalmology of the American Medical Association*, 1916, p. 265.

Report of the X-Ray Department

THE following cases have been examined in this Department:

Accessory sinuses:		
Sinusitis	161	
Sinusitis, sphenoidal	1	2
Neoplasm	2	1
Frontal sinus:		
Sinusitis	57	22
Absence of	13	
Ethmoid:		
Sinusitis	95	20
Fronto-ethmoiditis	29	
Antrum Highmore Sinusitis	108	10
Pansinusitis	53	
Teeth		10
Wisdom impacted	2	1
unerupted	3	
Caries or abscess	21	
Mastoid:		
Mastoiditis, acute	163	52
chronic sclerosed	118	
chronic sclerosed with cholesteotome	14	
recurrent	4	
Periostitis	1	
Fracture	1	4
Otitis externa diffusa	10	
Neoplasm	1	1
Skull:		
Sella turcica, enlargement of	4	11
Craniotabes	1	
Fracture	1	3
Frontal bone	1	
Maxilla, superior	2	
Septum, nasal		1
Cervical vertebrae	1	1
Frontal bone, specific periostitis	1	
specific osteitis	1	
Cerebral tumor	1	1
abscess	3	

REPORT OF THE X-RAY DEPARTMENT

Foreign body in eye	52	114
sclera	1	
cornea	1	
ciliary body	1	
iris	1	
orbit	2	
orbit (double perforation)	9	
lens	3	
brow	2	
lid	3	
bronchus	1	1
Orbit:		
Cellulitis	3	
Fracture	1	1
Periostitis	2	
Tumor	6	2
Unclassified	16	
	<u>816</u>	<u>419</u>
Total		1,235

WILLIAM LIEBMAN, M.D.,
Roentgenologist.

Report of Ophthalmic Department

House Operations

CONJUNCTIVA		Iridotasis	13
Conjunctival flap	27	Iridotomy	2
Pterygium	13	Plastic	1
Stripping	8	Prolapsed iris abscised . . .	2
Tumors of conjunctiva . . .	2	Total	134
Total	50		
CORNEA		LACHRYMAL APPARATUS	
Cauterization	1	Agnew's operation :	1
Paracentesis	8	Extirpation of tear sac . . .	55
Saemisch	18	Total	56
Tattooing	1		
Total	28	LENS	
ENUCLEATIONS		Capsulotomy	2
Buphthalmos	1	Cataract extraction:	
Disorganized globe	25	in capsule with iridectomy	22
Glaucoma, absolute	8	in capsule without iridec-	
Injury	29	tomy	2
Insertion of glass ball . . .	3	in capsule with iridectomy	
Irido-cyclitis	3	and scleral stitch . .	25
Panophthalmitis	7	linear	19
Phthisis bulbi	6	simple	23
Staphyloma	2	simple intracapsular with	
Tumor of globe	7	scleral stitch	1
Total	91	with buttonhole iridectomy	
EVISGERATION		and scleral stitch . .	10
Simple	4	with buttonhole iridec-	
Total	4	tomy	2
IRIS		with iridectomy	173
Eliot trephine operation . .	23	with Van Lint flap . . .	1
Iridectomy:		Discission	153
anterior synechia	6	Extraction for dislocation in	
glaucoma	42	anterior chamber . .	4
optical	18	Total	437
preliminary	2		
prolapsed iris (from in-		LIDS	
jury)	25	Canthotomy	4
		Ectropion	11
		Extirpation of cyst	4
		Plastic	27

REPORT OF THE OPHTHALMIC DEPARTMENT

Ptosis:		MISCELLANEOUS	
Pagenstecher	2	Excision of cyst of brow . .	2
Symblepharotomy	1	Excision of orbital growth .	3
Tumor excised	6	Excision of small piece of growth	
		for pathological record . .	1
Total	55	Exenteration	1
MUSCLES		Foreign body removed from	
		globe	38
Advancement:		Intraspinal injection of salvar-	
external rectus	27	sanized serum under pres-	
internal rectus	6	sure.	10
Tenotomy:		Krönlein operation	2
external rectus	10	Lumbar puncture	5
internal rectus	19	Plastic with skin graft for con-	
superior rectus	1	tracted orbit	9
Tucking of internal rectus .	1	Posterior transillumination .	2
		Removal of glass ball from orbit	1
Total	64	Salvarsan administered . . .	2
SCLERA		Skin graft inserted into orbital	
Sclerotomy	12	cavity	1
Suturing	1		
		Total	77
Total	13	Total operations	1,009

Out-Patient Operations

Abscess of brow incised . .	3	Furuncle of brow, incised . .	1
Abscess of lid incised . . .	34	Growth on lower lid removed	1
Agnew's incision	27	Hordeolum opened	41
Bowman's operation	2	Lid sutured	8
Canaliculous slit	4	Papilloma of caruncle re-	
Canthotomy	1	moved	2
Chalazion incised	259	Pinguicula removed	1
Conjunctiva sutured	10	Pterygium removed	31
Enucleation	10	Sebaceous cysts removed . .	10
Excision of epithelioma . .	1	Stripping	3
Excision of tumor of lid . .	1	Suppurative wen removed .	1
Fibrous granulation removed	3	Suture for entropion	1
Foreign body in conjunctiva		Tenotomy of external rectus	4
removed	230	Verruca removed	12
Foreign body in cornea re-			
moved	1,818	Total	2,519

Report of Aural Department

House Operations

AURICLE	
Perichondritis	4
Pre-auricular abscess incised	7
Removal of epithelioma of helix	1
Total	12
MEATUS	
Abscess (otitis external diffusive) incised	22
Atresia	1
Total	23
TYMPANUM	
Carious ossicles removed	4
Labyrinthectomy	4
Membrana tympani incised	49
Ossiculectomy with curettage of eustachian tube	1
Polypus removed	20
Tympanum curetted	1
Total	79
MASTOID REGION	
Abscess, post-aural, incised	17
Mastoid, simple	254
Mastoid, simple, with adenectomy	6
Mastoid, simple, with Bezold's abscess	4
Mastoid, simple, with cerebellar abscess	1
Mastoid, simple, with epidural abscess	2
Mastoid, simple, with exploratory incision of neck	1
Mastoid, simple, with intracranial complications	1
Mastoid, simple, with ligation of jugular	5
Mastoid, simple, with perisinus abscess	21
Mastoid, simple, with post-aural abscess	17
Mastoid, modified Heath	1
Radical mastoid	61
Radical mastoid with primary skin graft	6
Exploration of mastoid wound	1
Skin graft	16
Plastic	7
Total	421
NOSE, THROAT AND PHARYNX	
Adenoids removed	129
Adenoids and tonsils removed	876

REPORT OF THE AURAL DEPARTMENT

Antrum opened	18
Excision of thyro-gland cyst	1
Exenteration of ethmoid	34
Exenteration of sphenoid	4
Fibroma of palate	1
Fracture of nasal bones	2
Frontal sinus operation	10
Frontal sinus and antrum operation	2
Incision and drainage of retro-pharyngeal abscess	1
Intranasal extirpation of tear sac	1
Killian operation	3
Peritonsillar abscess incised	5
Plastic, external deformity of nose	9
Polypus removed	7
Radical antrum	12
Radical frontal	6
Radical frontal sinus and exenteration of anterior ethmoid	1
Submucous resection of septum	82
Tonsils removed	92
Turbinate cauterized	1
Turbinectomy	26
Total	1,323

MISCELLANEOUS

Abscess, cervical, incised	6
Abscess, post-aural, incised	17
Abscess of scalp incised	1
Brain abscess (temporal sphenoidal)	6
Cerebellar abscess	1
Cerebral decompression	6
Cervical glands incised	2
Drainage of brain abscess	4
Drainage of labyrinth	2
Exploration of cavernous sinus, orbital route	1
Exploration of lateral sinus	3
Extirpation of tumor in upper cervical region	1
Extraction of foreign body from bronchi	1
Extraction of foreign body from larynx	1
Furuncle on neck opened	1
Lumbar puncture	20
Papilloma of larynx	2
Plastic upper lip	1
Retropharyngeal abscess incised	1
Total	77
Total operations	1,935

Out-Patient Operations

Abscess of meatus incised	248	Furuncle of nares incised	2
Abscess, peritonsillar, incised	3	Gland incised	1
Abscess of septum incised	2	Hematoma of auricle incised	1
Abscess, auricular, incised	3	Polypi of nose removed	7
Adenoids removed	6	Polypi of tympani removed	6
Cyst of cartilage of nose ex- cised	1	Puncture, exploratory, of an- trum	1
Cyst, post-aural, resected	1	Spur of nose removed	1
Drum membrane, paracen- tesis	913	Submucous operations	144
Foreign body in ear removed	36	Tonsils removed	1
Foreign body in nose removed	6	Turbينات removed	20
Foreign body in throat re- moved	2	Uvula amputated	1
Fracture of septum reduced	1	Total	<u>1,407</u>

Explanation of Tables of Medical and Surgical Statistics

The Medical and Surgical statistics this year appear in an entirely different form from that ever used in this hospital before. The following table is a record of diseases treated in both House and Out-Patient Departments, listed according to the Classification which contains 39 "Sections." Diseases are numbered, first, according to section; second, according to the number of disease in section; and third, according to the International Classification. A great many serial numbers are omitted in all sections except 17, which means that no case of the disease corresponding to that number has been treated in this hospital during the past year. This table does not represent the number of patients treated, but the number of diseases that have been treated in either Service of the Hospital.

Table of Diseases

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE							OUT-PATIENT							
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL	
		M	D	F	D	M	D	F	D		M	F	M	F		
SECTION I																
SPECIFIC INFECTIOUS DISEASES																
GENERAL DISEASES																
1-9-6	Measles					1		6		7						
1-10-7	Scarlet Fever					1		1		2						
1-11-8	Whooping Cough	1								1						
1-12-9	Diphtheria (including Croup)					4		1		5				1	1	
1-21-92	Lobar Pneumonia	1	1			2	2	1	1	4						
1-22-91	Lobular (Broncho-) Pneumonia				1			2	1	3						
1-31-18	Erysipelas	2		1		3		2		8			8	4	12	
1-34-61	Epidemic Cerebrospinal Meningitis	1	1			2	2			3						
1-37-19	Mumps (Epidemic Parotitis)					1		1		2			6	3	9	
1-59-75	Trachoma	19		14						33	44	31			75	
1-67-25	Tinea Trichophytina													1	1	
1-77-34	Tuberculosis (unspecified)													1	1	
1-78-28	Tuberculosis of Lungs					1				1				4	4	
1-89-34	Tuberculosis of Lymph Nodes													1	1	
1-96-34	Tuberculosis of the Eye	2		1						3		2			2	
1-97-34	Tuberculosis of the Ear												1	1	2	
1-100-37	Syphilis							2		2			2	1	3	
1-103-37	Nose and Throat												2	4	6	
1-106-37	Ear and Eye	7		5		3				15	10	3	1		14	
1-109-37	Congenital			1	1					1	1		1	1	3	
1-113-37	Other Lesions Gummata, etc.					1				1			1		1	
1-114-37	Syphilis (doubtful diagnosis)												10	6	16	
1-123-38	Vaginitis, Gonorrheal Vulvovaginitis			1				6		7						
1-126-38	Conjunctivitis, Gonor- rheal, and other gon- orrheal conditions of the eye	9		6						15	12	4			16	
1-127-38	Arthritis, Gonorrheal			1						1	1				1	
SECTION II																
DISEASES DUE TO ANIMAL PARASITES																
2-22-145	Parasitic Insect											1		1	2	
2-28-145	Scabies					1				1						

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE									OUT-PATIENT				
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL
		M	D	F	D	M	D	F	D		M	F	M	F	
SECTION III															
DISEASES OF METABOLISM															
3-1-50	Diabetes Mellitus.....	.....	.....	1	1	.....	.....	.....	.....	1	.....	.....	.....	.....	.....
3-3-50	Diabetic Retinitis.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	1
SECTION IV															
CONDITIONS PECULIAR TO INFANCY															
4-1-151	Prematurity.....	.....	.....	1	1	.....	.....	.....	.....	1	.....	.....	.....	.....	.....
4-9-151	Improper feeding.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
4-25-38	Ophthalmia Neonatorum	.30	.....	34	.....	.....	.....	.....	.....	.64	.30	.24	.....	.....	.54
4-26-75	Non-gonorrheal.....	.39	.....	23	.....	.....	.....	.....	.....	.62	.51	.31	.....	.....	.82
4-29-151	Marasmus (Infantile Atrophy).....	.....	.....	1	1	.....	.....	.....	.....	1	.....	.....	.....	.....	.....
4-30-151	Malnutrition.....	.....	.....	2	2	.....	.....	.....	.....	2	.....	.....	.....	.....	.....
SECTION V															
DISEASES DUE TO PHYSICAL AGENTS															
5-1-167	Burns, Scalds, etc.....	.2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....	.....	.....
5-6-178	Frostbite.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	2
SECTION VI															
POISONINGS. INTOXICATIONS															
6-2-56	Delirium Tremens.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
SECTION VII															
CARCINOMA, SARCOMA, AND OTHER MALIGNANT GROWTHS, AND BENIGN TUMORS															
7-2-39a	Carcinoma														
	a. Cheek.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
7-4-39f	Sarcoma														
	a. Antrum.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
	b. Maxilla.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
7-5-39g	Mixed Malignant Growth														
	a. Palate.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
7-7-40a	Carcinoma														
	a. Esophagus.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
7-10-40f	Sarcoma														
	a. Nasopharynx.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....
7-44-44a	Carcinoma														
	a. Eye.....	1	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....
7-49-45a	Carcinoma														
	a. Lid.....	2	.....	.....	.....	.....	.....	.....	.....	2	1	.....	.....	.....	1
7-50-45b	Endothelioma														
	a. Ear.....	.....	.....	.....	.....	.....	.....	1	.....	1	.....	.....	.....	.....	.....

TABLE OF DISEASES

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE									OUT-PATIENT					
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL	
		M	D	F	D	M	D	F	D		M	F	M	F		
7-52-45f	Sarcoma							1		1					1	1
	a. Antrum.....							1		1					1	1
	b. Choroid.....	1								1		1				1
	c. Eye (unspecified)...	1								1						
	d. Lid.....			1						1		1				1
	e. Orbit.....			1						1	5	2				7
7-54-45g	Mixed Malignant Growth															
	a. Nose.....					1				1				1		1
	b. Orbit.....	1				1				2						
	c. Vertebra.....					1				1						
7-55-46	Non-Malignant Tumors															
	a. Brow.....			2						2						
	b. Conjunctiva.....	1								1						
	c. Ear.....											2				2
	d. Larynx.....													1		1
	e. Lids.....										2					2
	f. Neck.....							1		1						
	g. Orbit.....										3	3				6
	h. Parotid gland.....													1		1
7-62-46	Angioma															
	a. Lids.....										1	1				2
7-63-46	Angioma Cavernosum															
	a. Lids.....			1						1						
7-65-46	Cyst Chalazion.....										371	319				690
	a. Brow.....	1		1						2						
	b. Ear.....												4	1		5
	c. Lid.....			1						1						
7-67-46	Dermoid Cyst															
	a. Bronchi.....													1		1
	b. Brow.....	2		1						3						
	c. Conjunctiva.....	1								1	1	3				4
	d. Ear.....												4	1		5
7-69-46	Epithelioma															
	a. Auricle.....					2				2						
	b. Canthus.....	2								2						
	c. Conjunctiva.....	2								2						
	d. Cornea.....	1								1						
	e. Ear.....												2			2
	f. Lid.....	1		2						3	9	4				13
	g. Nostril.....												1			1
	h. Orbit.....	1								1						
7-70-46	Fibroma															
	a. Pharynx.....												2	2		4
7-73-46	Lipoma															
	a. Brow.....										1					1
7-74-46	Lymphangioma															
	a. Larynx.....					1				1						
7-76-46	Lymphoma															
	a. Eye.....	1								1	1					1
7-79-46	Glioma															
	a. Eye (unspecified)...	2		1	1					3						
	b. Retina.....			1						1	2	1				3

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE								OUT-PATIENT						
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL	
		M	D	F	D	M	D	F	D		M	F	M	F		
7-80-46	Papilloma															
	a. Auricle.....							2		2						
	b. Canal.....												1			1
	c. Larynx.....												1			1
	d. Lid.....										2					2
7-81-46	Polypus															
	a. Ear.....					6		2		8			46	23		69
	b. Nose.....					3		1		4			19	20		39
7-83-46	Wen															
	a. Ear.....												8	1		9
7-85-46	Myeloma															
	a. Orbit.....	1								1						
SECTION VIII																
CONGENITAL MALFORMATIONS																
8-1-150	Anomaly of Form.....													1		1
8-2-150	Albinism.....											1				1
8-8-150	Cleft Palate.....			1						1				2		2
8-9-150	Harelip.....			1		1				2			1	1		2
8-34-150	Hydrocephalus.....										3					3
8-43-150	Persistent Thyroglossal Duct.....					1				1						
8-48-150	Unclassified Congenital Malformations.....											1	1			2
8-49-150	Anomalies of the Eye (unclassified).....	1		1						2	6	9				15
8-50-150	Of the Conjunctiva..										1	1				2
8-53-150	Of the Iris.....										3	5				8
8-56-150	Of the Optic Nerve..										6	2				8
8-58-150	Of the Retina.....										2	2				4
8-62-150	Anomalies of the Ear (unclassified).....												1	1		2
SECTION IX																
GENERAL INJURIES AND DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUES																
9-1-	Abrasions.....										4	2	6	2		14
9-2-144	Abscess.....															
	a. Brow.....										7	3				10
	b. Orbit.....										1	1				2
	c. Scalp.....					1				1						
9-5-144	Cervical Abscess.....					4				4			1	1		2
9-16-144	Furunculosis.....										2	1				3
9-20-	Blisters.....												3			3
9-22-	Contusions															
	a. Eye.....										1					1
9-31-	Foreign Body															
	a. Ear.....												19	17		36

TABLE OF DISEASES

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE								OUT-PATIENT						
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL	
		M	D	F	D	M	D	F	D		M	F	M	F		
9-50-144	Other Localized Sepsis: "Cellulitis".....	.....	.....	.....	.....	.....	.....	2	2	2	.....	.....	.....	5	5	10
9-51-	Hematoma	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....	2
9-54-145	Ulcer	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
9-55-	Wounds	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	a. Brow.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	9	1	.....	.....	.....	10
SECTION X																
SPECIAL SKIN DISEASES																
10-3-145	Acne Vulgaris.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
10-33-145	Dermatitis (unclassified) .	.....	.....	.....	.....	.....	.....	.....	.....	.....	5	4	.....	5	3	17
10-40-145	Verruca.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
10-46-145	Dermatitis Venenata.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
10-50-145	Eczema.....	1	.....	.....	.....	.....	.....	2	.....	3	11	10	63	37	.....	121
10-52-145	Edema Circumscriptum	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	Acutum.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....	.....	2
10-69-145	Herpes Simplex.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	2	.....	3
10-78-145	Impetigo Contagiosa.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
10-80-145	Intertrigo.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	2
10-95-145	Lupus Erythematosus....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
10-97-145	Milium.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	5	3	.....	.....	.....	8
10-109-150	Nevus (unclassified).....	.....	.....	2	.....	.....	.....	.....	.....	2	.....	.....	.....	1	.....	1
10-115-145	Pemphigus.....	1	.....	4	.....	.....	.....	.....	.....	5	.....	1	.....	.....	.....	1
10-140-145	Verruca.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	14	8	.....	.....	.....	22
10-143-145	Xanthoma.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	3	.....	.....	.....	3
SECTION XI																
DISEASES OF THE CIRCULATORY SYSTEM																
11-3-81	Arteriosclerosis (general) .	.....	.....	.....	.....	1	1	.....	.....	1	9	5	2	.....	.....	16
11-8-81	Arteriosclerosis of Retinal Vessels.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	15	9	.....	.....	.....	24
11-15-82	Embolism and Throm- bosis.....	1	.....	.....	.....	.....	.....	1	.....	2	1	.....	.....	.....	.....	1
11-24-83	Unclassified Diseases of Veins.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	2	.....	.....	.....	3
11-27-77	Pericarditis (unclassified)	.....	.....	.....	.....	2	.....	.....	.....	2	.....	.....	.....	.....	.....	.....
11-51-79	Chronic Endocarditis (un- classified).....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
11-53-79	Acute Dilatation of Heart	.....	.....	1	1	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
11-57-85	Hypertension.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
11-63-79	Myocardial Insufficiency.	1	1	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
SECTION XII																
DISEASES OF THE LYMPHATIC SYSTEM																
12-1-84	Lymph Adenitis, acute	1	.....	.....	.....	1	.....	2	.....	4	.....	.....	21	9	.....	30
12-4-84	Lymphangiectasis	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	a. Conjunctiva.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	3	1	.....	.....	.....	4

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE							OUT-PATIENT							
		OPHTHALMIC				AURAL				Total	OPHTHALMIC		AURAL		Total	
		M	D	F	D	M	D	F	D		M	F	M	F		
12-14-84	Hypertrophy of Lymph Nodes.....													18	21	39
SECTION XIII																
DISEASES OF THE BLOOD																
13-1-54	Anemia, Pernicious.....							1		1					2	2
SECTION XIV																
DISEASES OF THE DUCTLESS GLANDS																
14-18-51	Exophthalmic Goiter.....											4			1	5
14-19-88	Dysthyroidism.....														4	4
14-29-55	Hyperpituitarism.....							1		1						
SECTION XV																
DISEASES OF THE NERVOUS SYSTEM																
15-12-	Laceration of Brain.....	1								1						
15-14-	Skull Fracture.....										1				6	7
15-18-61	Meningitis.....	1	1			8	8	1	1	10			3	1		4
15-19-74	Choked Disc.....	1				1		1		3	4	2				6
15-20-66	Facial Paralysis.....					2		2		4	4	7	3	3		17
15-21-145	Herpes Zoster.....										2					2
15-26-66	Paralysis of Individual Nerves															
	a. Ear.....												5	5		10
	b. Face.....												2			2
15-29-74	Caisson Disease.....					1				1			4	1		5
15-37-62	Tabes.....			1						1	1	1				2
15-40-60	Brain Abscess.....							1		1			1			1
15-48-66	Hemiplegia.....	1	1							1						
15-52-74	Idiocy and Imbecility....											1		1		2
15-53-74	Retarded Mental Development.....														1	1
15-57-74	Unclassified Brain Disease							1		1						
15-73-74	Speech Defect.....												1			1
15-75-74	Vertigo.....					4				4	1		1	1		3
	Neuralgia															
15-86-73	Supraorbital.....											2				2
15-93-73	Other Forms of Neuralgia												1	4		5
15-96-74	Tic Convulsif (Tourette's Disease).....										1					1
15-97-149	Torticollis.....													1		1
15-98-74	Psychoneuroses (unspecified).....												1	1		2
15-101-74	Hysteroid Type.....			1						1				1		1
SECTION XVI																
DISEASES OF BONES, JOINTS, MUSCLES, TENDONS, AND FASCIA																
16-2-146	Exostosis															
	a. Ear.....												2	2		4

TABLE OF DISEASES

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE								OUT-PATIENT							
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL		
		M	D	F	D	M	D	F	D		M	F	M	F			
16-20-147	Arthritis and Synovitis..	....	....	....	....	....	....	....	....	....	1	....	....	....	....	1
16-28-	Dislocation.....	....	....	....	....	....	....	....	....	....	....	....	1	....	....	1
	a. Nose.....	....	....	....	....	....	....	....	....	....	....	....	....	1	....	1
SECTION XVII																	
DISEASES AND INJURIES OF THE EYE AND THE EAR																	
Diseases of the Eye																	
A. General																	
17-2-75	Astigmatism.....	....	....	....	....	....	....	....	....	....	2540	....	....	....	....	2540
17-3-75	Hypermetropia.....	....	....	....	....	....	....	....	....	....	1399	....	....	....	....	1399
17-4-75	Myopia.....	....	....	1	....	....	....	....	....	1	284	....	....	....	....	284
17-5-75	Presbyopia.....	....	....	....	....	....	....	....	....	....	898	....	....	....	....	898
17-6-75	Glaucoma (unclassified)..	9	....	4	....	....	....	....	....	13	8	33	....	....	....	41
17-7-75	Acute.....	5	....	13	....	....	....	....	....	18	4	10	....	....	....	14
17-8-75	Chronic.....	26	....	21	....	....	....	....	....	47	9	10	....	....	....	19
17-9-75	Congenital.....	2	....	4	....	....	....	....	....	6	3	7	....	....	....	10
17-10-75	Hemorrhagic.....	....	....	....	....	....	....	....	....	....	1	....	....	....	....	1
17-11-75	Secondary.....	4	....	6	....	....	....	....	....	10	4	4	....	....	....	8
17-12-75	Simplex.....	1	....	1	....	....	....	....	....	2	....	2	....	....	....	2
17-13-75	Subacute.....	....	....	....	....	....	....	....	....	....	1	....	....	....	....	1
17-14-75	Traumatic.....	1	....	....	....	....	....	....	....	1	....	....	....	....	....	....
17-15-75	Unclassified Diseases of the Eye.....	1	....	....	....	....	....	....	....	1	172	117	....	....	....	289
B. Lids																	
17-16-75	Abscess.....	....	....	1	....	....	....	....	....	1	55	23	....	....	....	78
17-17-75	Ankyloblepharon.....	....	....	1	....	....	....	....	....	1	1	....	....	....	....	1
17-18-75	Blepharitis (unclassified)..	3	....	3	....	....	....	....	....	6	230	192	....	....	....	422
17-19-75	Squamous.....	1	....	....	....	....	....	....	....	1	62	56	....	....	....	118
17-20-75	Ulcerative.....	1	....	....	....	....	....	....	....	1	71	61	....	....	....	132
17-22-187	Ecchymosis.....	....	....	....	....	....	....	....	....	....	41	16	....	....	....	57
17-23-75	Ectropion (unclassified)..	5	....	1	....	....	....	....	....	6	48	9	....	....	....	57
17-24-75	Cicatricial.....	4	....	2	....	....	....	....	....	6	3	2	....	....	....	5
17-25-75	Paralytic.....	1	....	....	....	....	....	....	....	1	3	1	....	....	....	4
17-26-75	Senile.....	....	....	....	....	....	....	....	....	....	2	....	....	....	....	2
17-28-187	Edema.....	....	....	....	....	....	....	....	....	....	39	21	....	....	....	60
17-29-145	Emphysema.....	....	....	....	....	....	....	....	....	....	1	....	....	....	....	1
17-30-75	Entropion (unclassified)..	1	....	....	....	....	....	....	....	1	4	5	....	....	....	9
17-33-75	Spasmodic.....	....	....	....	....	....	....	....	....	....	1	3	....	....	....	4
17-34-75	Hordeolum.....	....	....	....	....	....	....	....	....	....	198	142	....	....	....	340
17-35-75	External.....	....	....	....	....	....	....	....	....	....	1	1	....	....	....	2
17-36-75	Internal.....	....	....	....	....	....	....	....	....	....	4	3	....	....	....	7
17-37-75	Trichiasis.....	3	....	2	....	....	....	....	....	5	19	11	....	....	....	30
17-38-	Wounds and Injuries....	4	....	....	....	....	....	....	....	4	73	12	....	....	....	85
C. Lacrimal Apparatus																	
17-39-75	Concretion in Canaliculus	....	....	....	....	....	....	....	....	....	1	....	....	....	....	1
17-41-75	Dacryocystitis (unclas- sified).....	2	....	2	....	....	....	....	....	4	20	35	....	1	....	56

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE									OUT-PATIENT				
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL
		M	D	F	D	M	D	F	D		M	F	M	F	
17-42-75	Acute.....	..4	..	..3	..	..	..	..	..	..7	..14	..31	..1	..	..46
17-43-75	Chronic.....	..15	..	..20	..	..	..	..	..	..35	..21	..53	..	..	..74
17-45-75	Fistula of Lacrimal Gland	..	..	..	..	..	..	..	..	..	..	..1	..	..	..1
17-47-75	Mucocele.....	..7	..	..11	..	..1	..	..	..	..19	..48	..54	..	..	..102
17-48-75	Occlusion of Puncta.....	..	..	..	..	..	..	..	..	..	..16	..15	..	..	..31
17-49-75	Stenosis of Naso-Lacrimal Duct.....	..	..	..	..	..	..	..	..	..	..18	..39	..	..	..57
D. Conjunctiva															
17-51-75	Conjunctivitis (unclassified).....	..2	..	..2	..	..	..	..	..	..4	..290	..208	..	..	..498
17-52-75	Acute.....	..12	..	..13	..	..	..	..	..	..25	..670	..445	..	..	..1115
17-53-75	Chronic.....	..	..	..1	..	..	..	..	..	..1	..460	..313	..	..	..773
17-54-75	Follicular.....	..	..	..	..	..	..	..	..	..	..34	..13	..	..	..47
17-56-75	Membranous.....	..1	..	..1	..	..	..	..	..	..2	..4	..	..	..	..4
17-58-75	Phlyctenular.....	..4	..	..2	..	..	..	..	..	..6	..97	..171	..	..	..268
17-59-75	Subacute.....	..	..	..	..	..	..	..	..	..	..153	..129	..	..	..282
17-60-75	Vernal.....	..	..	..	..	..	..	..	..	..	..10	..1	..	..	..11
17-61-187	Ecchymosis.....	..	..	..	..	..	..	..	..	..	..135	..60	..	..	..195
17-62-186	Foreign Body.....	..	..	..	..	..	..	..	..	..	..163	..67	..	..	..230
17-63-84	Lymphoid Hypertrophy..	..	..	..	..	..	..	..	..	..	..6	..4	..	..	..10
17-65-75	Pterygium.....	..11	..	..5	..	..	..	..	..	..16	..92	..35	..	..	..127
17-66-75	Symblepharon.....	..	..	..	..	..	..	..	..	..	..3	..2	..	..	..5
17-67-	Wounds and Injuries....	..11	..	..2	..	..	..	..	..	..13	..227	..33	..	..	..260
E. Cornea															
17-68-75	Conical Cornea.....	..	..	..1	..	..	..	..	..	..1	..	..2	..	..	..2
17-69-75	Foreign Body.....	..1	..	..	..	..	..	..	..	..1	1690	..128	..	..	1818
17-70-	Injuries.....	..29	..	..4	..	..	..	..	..	..33	..375	..41	..	..	..416
17-71-75	Keratitis.....	..7	..	..4	..	..	..	..	..	..11	..49	..55	..	..	..104
17-73-75	Dendritic.....	..1	..	..2	..	..	..	..	..	..3	..6	..4	..	..	..10
17-74-75	Fascicular.....	..	..	..	..	..	..	..	..	..	..1	..	..	..	..1
17-75-75	Herpetic.....	..	..	..	..	..	..	..	..	..	..1	..2	..	..	..3
17-76-75	Interstitial.....	..20	..	..20	..	..	..	..	..	..40	..42	..44	..	..	..86
17-78-75	Marginal.....	..1	..	..1	..	..	..	..	..	..2	..46	..18	..	..	..64
17-79-75	Neuropathic.....	..18	..	..	..	..	..	..	..	..18	..44	..16	..	..	..60
17-81-75	Phlyctenular.....	..31	..	..35	..	..	..	..	..	..66	..155	..148	..	..	..303
17-82-75	with Pannus.....	..1	..	..	..	..1	..	..	..	..2	..	..	..	..	..
17-85-75	Serpiginous.....	..1	..	..	..	..	..	..	..	..1	..	..	..	..	..
17-86-	Traumatic, with perforation.....	..50	..	..8	..	..	..	..	..	..58	..46	..10	..	..	..56
17-87-75	Ulcerative.....	..60	..	..15	..	..	..	..	..	..75	..208	..92	..	..	..300
17-88-75	with Hypopyon.....	..34	..	..1	..	..	..	..	..	..35	..26	..2	..	..	..28
17-91-75	Leucoma (unclassified)...	..5	..	..2	..	..	..	..	..	..7	..18	..11	..	..	..29
17-92-75	Adherent.....	..6	..	..1	..	..	..	..	..	..7	..14	..11	..	..	..25
17-93-75	Inflamed.....	..2	..	..1	..	..	..	..	..	..3	..27	..9	..	..	..36
17-94-75	Macula.....	..2	..	..	..	..	..	..	..	..2	..75	..57	..	..	..132
17-95-75	Nebula.....	..	..	..1	..	..	..	..	..	..1	..58	..42	..	..	..100
17-96-170	Powder in Cornea.....	..2	..	..	..	..	..	..	..	..2	..	..	..	..	..
17-97-	Rupture.....	..	..	..	..	..	..	..	..	..	..3	..	..	..	..3
17-98-75	Staphyloma.....	..3	..	..3	..	..	..	..	..	..6	..4	..6	..	..	..10

TABLE OF DISEASES

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE									OUT-PATIENT				
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL
		M	D	F	D	M	D	F	D		M	F	M	F	
17-99-	Wound, perforating, with Foreign Body.....	..17	..	..1	..	..	..	..	..	..18	..6	..	..	..	..6
17-100-	in Anterior Chamber...	..1	..	..	..	..	..	..	..	..1	..5	..	..	..	..5
17-101-	in Globe.....	..13	..	..1	..	..	..	..	..	..14	..5	..	..	..	..5
17-102-	in Iris.....	..1	..	..1	..	..	..	..	..	..2	..	..	..	..	..
17-103-	in Lens.....	..3	..	..	..	..	..	..	..	..3	..2	..	..	..	..2
17-104-	in Orbit.....	..2	..	..	..	..	..	..	..	..2	..	..	..	..	..
F. Sclera															
17-107-75	Episcleritis.....	..	..	..	..	..	..	..	..	..	..13	..16	..	..	..29
17-108-	Rupture.....	..3	..	..	..	..	..	..	..	..3	..4	..1	..	..	..5
17-109-75	Scleritis.....	..1	..	..2	..	..	..	..	..	..3	..14	..12	..	..	..26
17-110-75	Sclero-keratitis.....	..3	..	..2	..	..	..	..	..	..5	..2	..11	..	..	..13
17-112-	Wound, perforating, with Foreign Body.....	..16	..	..1	..	..	..	..	..	..17	..3	..1	..	..	..4
17-114-	in Globe.....	..1	..	..1	..	..	..	..	..	..2	..	..	..	..	..
17-119-	in Vitreous.....	..	..	..	..	..	..	..	..	..	..1	..	..	..	..1
G. Lens															
17-120-75	Cataract.....	..1	..	..4	..	..	..	..	..	..5	..9	..16	..	..	..25
17-121-75	Capsular.....	..40	..	..35	..	..	..	..	..	..75	..12	..3	..	..	..15
17-122-75	Congenital.....	..23	..	..23	..	..	..	..	..	..46	..17	..17	..	..	..34
17-124-75	Complicated.....	..4	..	..2	..	..	..	..	..	..6	..2	..	..	..	..2
17-127-75	Cortical, posterior.....	..1	..	..	..	..	..	..	..	..1	..2	..	..	..	..2
17-128-75	Polar (unclassified).....	..	..	..	..	..	..	..	..	..	..1	..	..	..	..1
17-129-75	Anterior.....	..	..	..	..	..	..	..	..	..	..2	..1	..	..	..3
17-130-75	Posterior.....	..	..	..	..	..	..	..	..	..	..7	..2	..	..	..9
17-131-75	Presenile.....	..4	..	..2	..	..	..	..	..	..6	..2	..1	..	..	..3
17-132-75	Senile (unclassified).....	..11	..	..4	..	..	..	..	..	..15	..4	..8	..	..	..12
17-133-75	Incipient.....	..5	..	..2	..	..	..	..	..	..7	..104	..121	..	..	..225
17-134-75	Immature.....	..37	..	..36	..	..	..	..	..	..73	..93	..77	..	..	..170
17-135-75	Mature.....	..94	..	..82	..	..	..	..	..	..176	..92	..48	..	..	..140
17-136-75	Hyperature.....	..3	..	..1	..	..	..	..	..	..4	..6	..1	..	..	..7
17-137-	Traumatic without perforation.....	..52	..	..3	..	..	..	..	..	..55	..49	..7	..	..	..56
17-138-	Dislocation, traumatic without perforation...	..4	..	..	..	..	..	..	..	..4	..12	..2	..	..	..14
H. Uveal Tract															
17-139-75	Sympathetic Inflammation.....	..4	..	..1	..	..	..	..	..	..5	..2	..1	..	..	..3
17-140-75	Uveitis.....	..6	..	..7	..	..	..	..	..	..13	..18	..14	..	..	..32
Iris															
17-141-75	Atrophy.....	..	..	..	..	..	..	..	..	..	..	..1	..	..	..1
17-142-75	Excluded Pupil.....	..	..	..3	..	..	..	..	..	..3	..2	..	..	..	..2
17-143-75	Iridodialysis without perforation.....	..2	..	..	..	..	..	..	..	..2	..7	..	..	..	..7
17-144-75	Iridodonesis without perforation.....	..	..	..	..	..	..	..	..	..	..4	..	..	..	..4

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE									OUT-PATIENT				
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL
		M	D	F	D	M	D	F	D		M	F	M	F	
17-145-75	Iritis (unclassified).....	..39	..	..11	..	..	..	..	..	..50	..145	..64	..	..	..209
17-146-75	Post-operative.....	..	..	..1	..	..	..	..	..	..1	..	..	..	..	..
17-147-75	Rheumatic.....	..4	..	..1	..	..	..	..	..	..5	..15	..5	..	..	..20
17-148-75	Traumatic without perforation.....	..6	..	..	..	..	..	..	..	..6	..8	..1	..	..	..9
17-149-75	Occluded Pupils.....	..9	..	..2	..	..	..	..	..	..11	..7	..3	..	..	..10
	Ciliary Body														
17-150-75	Cyclitis.....	..2	..	..	..	..	..	..	..	..2	..3	..2	..	..	..5
17-151-75	Iridocyclitis (unclassified)	..3	..	..3	..	..	..	..	..	..6	..2	..	..	..	..2
17-152-	Wound, perforating, with Foreign Body.....	..4	..	..	..	..	..	..	..	..4	..	..	..	..	..
17-155	in Iris.....	..1	..	..	..	..	..	..	..	..1	..1	..	..	..	..1
	Choroid														
17-160-75	Atrophy.....	..	..	..	..	..	..	..	..	..	..1	..4	..	..	..5
17-161-75	Choroiditis (unclassified).	..4	..	..1	..	..	..	..	..	..5	..30	..30	..	..	..60
17-163-75	Central.....	..	..	..1	..	..	..	..	..	..1	..1	..2	..	..	..3
17-165-75	Disseminate.....	..1	..	..	..	..	..	..	..	..1	..	..	..	..	..
17-167-	Rupture traumatic, without perforation.....	..	..	..	..	..	..	..	..	..	..4	..	..	..	..4
	I. Retina														
17-169-75	Color Blindness.....	..	..	..	..	..	..	..	..	..	..5	..	..	..	..5
17-170-	Commotio Retina, traumatic.....	..	..	..	..	..	..	..	..	..	..1	..1	..	..	..2
17-171-75	Edema.....	..	..	..	..	..	..	..	..	..	..2	..1	..	..	..3
17-172-75	Hemianopsia.....	..	..	..	..	..	..	..	..	..	..	..1	..	..	..1
17-174-75	Neuroretinitis.....	..2	..	..	..	..	..	..	..	..2	..10	..4	..	..	..14
17-176-75	Retinitis (unclassified) ..	..1	..	..1	..	..	..	..	..	..2	..27	..30	..	..	..57
17-177-75	Albuminuric.....	..	..	..	..	..	..	..	..	..	..3	..6	..	..	..9
17-179-75	Hemorrhagic.....	..	..	..	..	..	..	..	..	..	..7	..4	..	..	..11
17-181-75	Pigmentosa.....	..	..	..	..	..	..	..	..	..	..6	..2	..	..	..8
17-182-75	Proliferans.....	..1	..	..	..	..	..	..	..	..1	..	..	..	..	..
17-183-75	Separation of Retina.....	..11	..	..5	..	..	..	..	..	..16	..23	..9	..	..	..32
17-184-	Traumatic, without perforation .....	..	..	..	..	..	..	..	..	..	..1	..1	..	..	..2
	J. Vitreous														
17-186-75	Hemorrhage.....	..	..	..	..	..	..	..	..	..	..2	..3	..	..	..5
17-188-75	Opacity.....	..	..	..1	..	..	..	..	..	..1	..74	..69	..	..	..143
	K. Optic Nerve														
17-190-75	Atrophy (unclassified)...	..8	..	..3	..	..	..	..	..	..11	..26	..7	..	..	..33
17-191-75	Primary.....	..1	..	..	..	..	..	..	..	..1	..	..	..	..	..
17-192-75	Secondary .....	..8	..	..	..	..	..	..	..	..8	..	..	..	..	..
17-193-75	Neuritis, Optic.....	..4	..	..2	..	..	..	..	..	..6	..9	..10	..	..	..19
17-194-75	Neuritis, Retrobulbar....	..5	..	..	..	..	..	..	..	..5	..6	..	..1	..	..7
17-195-75	Acute.....	..1	..	..	..	..	..	..	..	..1	..4	..1	..	..	..5

TABLE OF DISEASES

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE								OUT-PATIENT					
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL
		M	D	F	D	M	D	F	D		M	F	M	F	
17-196-75	Chronic. Toxic Amblyopia.....	..2		..1					..3	..26					..26
	L. Eyeball														
17-197-75	Contracted Orbit.....	..9		..6					..15	..4	..2				..6
17-198-75	Disorganized Globe.....	..24		..9					..33	..32	..19				..51
17-199-75	Enophthalmos.....									..2	..1				..3
17-200-75	Exophthalmos.....	..1		..2		..1			..4	..11	..9	..1			..21
17-202-186	Foreign Body.....	..11							..11	..16					..16
17-203-75	Panophthalmitis.....	..10		..2					..12	..3					..3
17-204-	Wounds and Injuries....	..39		..4					..43	..114	..13				..127
	M. Orbit														
17-206-144	Cellulitis.....	..4							..4	..3	..2		..1		..6
17-208-	Fracture.....	..1							..1	..4					..4
17-209-75	Hemorrhage.....									..1					..1
	N. Disturbances of Motion														
17-212-75	Nystagmus.....									..38	..17				..55
17-213-66	Paralysis.....					..1			..1	..7	..1				..8
17-214-66	3d Nerve (Ptosis).....	..3		..2		..1			..6	..42	..26				..68
17-216-66	4th Nerve.....									..2					..2
17-218-66	6th Nerve.....	..2		..2					..4	..24	..8				..32
17-219-66	7th Nerve.....									..1					..1
17-221-75	Strabismus, alternating..	..1		..3					..4	..1	..4				..5
17-222-75	Convergent.....	..13		..10					..23	..15	..24				..39
17-223-75	Divergent.....	..3		..2					..5	..4	..2				..6
17-224-75	Strabismus, convergent..	..5		..7					..12	..231	..233				..464
17-225-75	Divergent.....	..2		..2					..4	..33	..75				..108
17-226-75	Vertical.....	..1							..1						
	Diseases of the Ear														
	A. General														
17-228-76	Deaf-mutism, acquired...											..8	..4		..12
17-230-154	Deafness, senile (arterio-sclerosis).....											..2			..2
17-231-76	Otalgia.....							..1	..1			..1	..11		..12
17-232-76	Unclassified Diseases of the Ear.....					..1			..1			..8	..7		..15
	B. Auricle														
17-233-76	Abscess.....											..6	..1		..7
17-234-76	Preauricular.....					..1			..1			..4			..4
17-235-76	Postauricular.....					..1		..4	..5			..18	..21		..39
17-236-76	Hematoma (Othematoma).....											..5			..5
17-238-76	Perichondritis.....					..3		..2	..5			..1			..1
17-239-	Wounds and Injuries....											..4	..3		..7

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE									OUT-PATIENT				
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL
		M	D	F	D	M	D	F	D		M	F	M	F	
C. External Auditory Canal															
17-240-76	Atresia.....							1		1				1	1
17-241-76	Cerumen.....												.943	.558	1501
17-244-76	Otitis Externa, circum- scribed, acute.....					2		5		7			.151	.189	.340
17-245-76	Diffuse, acute.....					15		18		33			.114	.103	.217
D. Eustachian Tube															
17-246-76	Salpingitis.....												.51	.51	.102
17-247-76	Acute.....												.28	.16	.44
17-249-76	Chronic.....												.2	.1	.3
E. Middle Ear and Mastoid															
17-250-	Injury to Membrana Tym- pani (unspecified)							1		1			.2		.2
17-251-	Rupture.....												.5	.3	.8
17-252-76	Mastoiditis, acute.....					9		6		15			.16	.13	.29
17-253-76	Myringitis.....					1				1			.2	.3	.5
17-254-76	Otitis media, acute and chronic (unclassified).					4		6		10			.475	.381	.856
17-254a-76	with mastoiditis. ....												.31	.12	.43
17-255-76	Non-suppurative, chronic.....					4				4					
17-257-76	Adhesive (hyperplastic) with salpingitis					1		1		2			.738	.611	1349
17-259-76	Suppurative, acute....					58		44		102			.490	.368	.858
17-260-76	with mastoiditis.....					179		176	.1	355			.75	.67	.142
17-261-76	with infective sinus thrombosis					4	.2			4					
17-262-76	with epidural abscess.....					1				1					
17-262a-76	with perisinus abscess.....					1		3		4			.1		.1
17-263-76	with cerebral abscess.....					2	.1	2	.1	4					
17-266-76	with acute diffuse suppurative laby- rinthitis.....					1				1					
17-268-76	with purulent lep- tomeningitis....					3	.2	3	.3	6					
17-269-76	with acute suppara- tive labyrinthitis..														
17-272-76	with purulent lep- tomeningitis....												.1		.1
17-273-76	with infective sinus thrombosis					2		2		4			.1		.1
17-275-76	Suppurative, chronic...					69		68		137			.458	.467	.925
17-275a-76	With mastoiditis					9		10		19			.22	.19	.41
17-276-76	With acute diffuse suppurative laby- rinthitis.....					2		2		4					

TABLE OF DISEASES

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE							OUT-PATIENT							
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL	
		M	D	F	D	M	D	F	D		M	F	M	F		
17-279-76	with cerebral abscess	....	..	....	..	..	1	..	....	..	1	....	..	....	....	....
17-280-76	with purulent leptomeningitis.....	....	..	....	..	..	1	..	..2	2	..3	....	..	....	....	....
17-281-76	with infection of lateral sinus.....	....	..	....	..	..	2	..	..1	..3	....	..	....	....	....	....
17-282-76	Results of.....	....	..	....	..	..	1	..	....	..1	....	..	..170	..127	..297	....
17-283-76	Otosclerosis.....	....	..	....	..	..	..	..	..	..	....	..	..7	..5	..12	....
F. Internal Ear																
17-285-76	Hemorrhage.....	....	..	....	..	..	..	..	..	..	....	..	..1	..	..1	....
17-287-76	Injury to internal auditory meatus.....	....	..	....	..	..	..	..	..	..	....	..	..3	..4	..7	....
17-288-76	Labyrinthitis (unclassified).....	....	..	....	..	..	4	..	..	..4	....	..	..7	..3	..10	....
17-293-76	Suppurative diffuse, with meningeal irritation..	....	..	....	..	..	..	..1	..	..1	....	..	..	..	..	....
17-295-76	Diffuse serous.....	....	..	....	..	..	3	..	..1	..4	....	..	..	..1	..1	....
17-299-76	Unfits.....	....	..	....	..	..	..	..	..	..	....	..	..39	..10	..49	....
SECTION XVIII																
DISEASES OF THE NOSE																
18-3-86	Hypertrophy of Bulbous Middle Turbinate.....	..1	..	....	..	..	2	..	..7	..10	....	..	..47	..46	..93	....
18-4-86	Deformity of Nose (acquired).....	....	..	....	..	..	6	..	..3	..9	....	..	..4	..4	..8	....
18-5-86	Epistaxis.....	....	..	....	..	..	2	..	..1	..3	....	..	..24	..11	..35	....
18-6-86	Foreign Body in Nose....	....	..	....	..	..	..	..	..	..	....	..	..4	..2	..6	....
18-7-	Fracture of Nasal Bones..	....	..	....	..	..	1	..	..	..1	....	..	..17	..4	..21	....
18-9-86	Septum	....	..	....	..	..	..	..	..	..	....	..	..	..	..	....
18-9-86	Deviation.....	....	..	....	..	..	88	..	..37	..125	....	..	..489	..183	..672	....
18-10-86	Perforation.....	....	..	....	..	..	..	..	..	..	....	..	..3	..1	..4	....
18-11-86	Abscess.....	....	..	....	..	..	..	..1	..	..1	....	..	..1	..1	..2	....
18-12-86	Spur.....	....	..	....	..	..	..	..	..	..	....	..	..24	..16	..40	....
18-13-86	Ozena (Atrophic Rhinitis).....	....	..	....	..	..	2	..	..	..2	....	..	..30	..35	..65	....
18-14-86	Rhinitis (acute, chronic)..	..1	..	....	..	..	3	..	..	..4	....	..	..179	..143	..322	....
18-15-86	Vasomotor Rhinitis.....	....	..	....	..	..	..	..	..	..	....	..	..4	..3	..7	....
18-18-86	Ulcer.....	....	..	....	..	..	..	..	..	..	....	..	..2	..1	..3	....
18-19-86	Sinusitis (acute and chronic) to include Empyema of Antrum.....	....	..	....	..	..	23	..	..31	..54	..11	..5	..112	..77	..205	....
18-20-143	Furuncle.....	....	..	....	..	..	..	..	..	..	....	..	..6	..	..6	....
18-21-146	Ethmoiditis, etc.....	....	..	....	..	..	17	..	..13	..30	....	..	..26	..31	..57	....
18-22-143	Furunculosis of Vestibule..	....	..	....	..	..	..	..1	..	..1	....	..	..	..	..	....
18-23-145	Eczema of Vestibule.....	....	..	....	..	..	..	..	..	..	....	..	..16	..10	..26	....
18-24-	Wounds and Injuries....	....	..	....	..	..	..	..	..	..	..1	..	..	..2	..3	....
18-25-86	Unclassified Diseases of the Nose.....	....	..	....	..	..	..	..1	..	..1	....	..	..1	..3	..4	....

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE							OUT-PATIENT							
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL	
		M	D	F	D	M	D	F	D		M	F	M	F		
SECTION XIX																
DISEASES OF THE MOUTH, LIPS, CHEEKS, PHARYNX, TONSILS, PALATE																
19-4-99	Abscess of Cheek.....										1					1
19-11-19	Stomatitis, Herpetic (Canker).....	1								1						
19-17-100	Peritonsillar Abscess....					1		5		6			7	11		18
19-19-100	Hypertrophy of Tonsils...					32		40		72			43	60		103
19-20-99	Enlarged Lingual Tonsil..												46	47		93
19-21-100	Tonsillitis (acute, chronic, unclassified).....					8		13		21						
19-23-100	Tonsils and Adenoids.....					461		425		886			652	635		1287
19-24-86	Adenoids.....					76		43		119			212	160		372
19-26-100	Unclassified Diseases of Tonsils.....			1		2		10		13			20	36		56
19-28-100	Retropharyngeal Abscess.					1		1		2			1			1
19-29-100	Pharyngitis (acute, chronic, unclassified)...							2		2			84	60		144
19-32-100	Vincent's Angina.....							1		1			1			1
19-33-100	Foreign Body — throat...												1	3		4
19-36-	Wounds and Injuries of Pharynx.....					1				1						
19-39-100	Elongation of Uvula.....												7	1		8
SECTION XX																
DISEASES OF THE JAW, TEETH, AND GUMS																
20-1-99	Alveolar Abscess.....												1			1
20-2-99	Pyorrhea Alveolaris.....												8	7		15
20-3-99	Caries of Teeth.....												31	46		77
20-5-	Fracture of Jaw.....					2				2						
20-6-99	Odontalgia.....												30	71		101
20-10-99	Delayed Dentition.....													1		1
SECTION XXII																
DISEASES OF THE ESOPHAGUS																
22-3-101	Foreign Body.....												1			1
SECTION XXIX																
DISEASES OF THE LARYNX																
29-7-186	Foreign Body.....					1				1						
29-9-87	Laryngitis (unclassified)...												2	2		4
29-10-87	Laryngitis (acute and chronic).....												9	5		14

TABLE OF DISEASES

TABLES OF DISEASES COMPILED FROM HOUSE RECORDS		HOUSE							OUT-PATIENT							
		OPHTHALMIC				AURAL				TOTAL	OPHTHALMIC		AURAL		TOTAL	
		M	D	F	D	M	D	F	D		M	F	M	F		
SECTION XXX																
DISEASES OF THE TRACHEA AND BRONCHI																
30-1-96	Asthma.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
30-3-90	Bronchitis (unclassified)..	.....	.....	2	.....	.....	.....	.....	.....	2	.....	.....	.....	.....	.....	.....
30-15-186	Foreign Body in Bronchus	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
SECTION XXXI																
DISEASES OF THE LUNGS																
31-1-98	Abscess.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
31-11-98	Unclassified Diseases of the Lungs.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
SECTION XXXIII																
DISEASES OF THE KIDNEY AND URETER																
33-18-120	Nephritis, Chronic (un- specified).....	.....	.....	.....	.....	1	1	.....	.....	1	.....	1	1	.....	.....	2
33-20-120	Nephritis, Chronic Inter- stitial.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	1
33-25-120	Nephritis, Chronic Glo- merulo.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
SECTION XXXIX																
ILL-DEFINED, OR UNCLASSIFIED DISEASES																
39-5-189	Debility.....	1	1	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	1	1
39-11-189	Fever (cause unknown)...	.....	.....	.....	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....
39-14-189	Hemorrhage, Post- operative.....	.....	.....	.....	.....	1	.....	1	.....	2	.....	.....	.....	.....	.....	.....
39-16-189	Malingerer.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....	.....	2
39-19-189	No Diagnosis, unknown disease .....	.....	.....	.....	.....	7	.....	4	.....	11	.271	.105	.223	.202	.801	
39-20-189	No Disease.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.217	.68	.64	.89	.438	
39-21-189	Operation Wound.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	2
FINAL TOTALS		1162	..	.641	..	1202	..	1045	..	4050	9143	4907	6676	5349	31196	
Astigmatism, Hypermetropia, Myo- pia, and Presbyopia, see p. 53 .....		.....	.....	.....	.....	.....	.....	.....	.....	.....	+	5121	.....	.....	.....	.....
DEATH TOTALS .....		.....	.6	.....	.8	.....	19	.....	12	.45	.....	.....	.....	.....	.....	.....

Form of a Bequest to the Infirmary

*I give and bequeath to the Massachusetts
Charitable Eye and Ear Infirmary of Boston,
the sum of dollars, to be applied to the
uses of said Infirmary.*

